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TO:

TO:	Registration Se Division of Cor						
erin ti	s ziwys	SPACE COAST I	NNOVATION PARK, LL	c			
SUBJE	.CI:	Name of Lim	ited Liability Company				
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please	return all correspo	ndence concerning this matter	to the following:				
			Robin Willner, Esq.				
			Name of Person				
			Saavedra-Goodwin				
			Firm/Company				
		888	SE 3rd Avenue, Suite 500				
		Address					
			Fort Lauderdale, FL 33316				
		City/State and Zip Code					
			salejo@saavlaw.com				
			to be used for future annual re	port notification)			
For fur	ther information c	oncerning this matter, please co	all:				
	Robin W	illner, Esq.	954	767-6333			
	Name o	f Person	at () Area Code	Daytime Telephone Number			
Enclos	ed is a check for th	ne following amount:					
■ \$2	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)			
	Mailing Addres Registration S		<u>Street Ade</u> Registrat	<u>tress:</u> ion Section			
	Division of C			of Corporations			

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SPACE COAST INNOV	ATION PARK, L	I.C	TILL THE	_
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	y as it now appear iability Company)	s on our records.)	JUN -8	1
The Articles of Organization for this Limited Liability Company of Storida document number This amendment is submitted to amend the following:	were filed on	01/21/2022	and assigned 6: 31	[
A. If amending name, enter the new name of the limited liabi	lity company he	<u>re</u> :		
The new name must be distinguishable and contain the words "Limited Liabili Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ity Company," the de	esignation "LLC" or the a	abbreviation "L.L.C."	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our ro	ecords, <u>enter the na</u>	me of the new register	<u>:d</u>
Name of New Registered Agent:				
New Registered Office Address:	Enter Flor	ida street address		
	City	Florida _	Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

DocuSign Envelope ID: 79512B18-9ACE-4771-A20B-65C6BECE299B rr amending Authorized rerson(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Key Group Corporate Services Inc	134 Mediterranean Way	
		Indian Harbor Beach, FL	≣Remove
			□Change
MGR	KEY Xspancial Group, LLC	355 Golden Knights Blvd, Suite #3	■Add
		Titusville, FL 32780	□Remove
			□Change
			□Add
			Remove
			□ Change
			🗆 Add
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			Remove
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Effective date, if other fan effective date is listed, the Note: If the date inserted document's effective date	in this block does	not meet the applica	o date of filing or more than 9 ble statutory filing require	(optional) 0 days after filing.) ments, this date v	Pursuant to vill not be	605.0207 listed as
record specifies a delayed is filed.	ed effective date, bu	it not an effective tin	ie, at 12:01 a.m. on the ea	rlier of: (b) The	90th day	after the
	/2022					
Dated		·	_ •		A	20.5
	L. Al	Helena Walace	ized representative of a men		ALLAH	
	Signature	of a member or author	ized representative of a men	ber		-\₩
		KATHLEEN	F YONGF		ASSEE, F	2022 JUN -8 PM
		Typed or printed			<u> </u>	_