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SECRETARY OF STATE
TALLAHASSEE, FL

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APR 1 9 2022

COVER LETTER

Registration Section

Division of Corporations

TO:

	IFE GROUP, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Erik J Webster		
		Name of Person	
	DIRECT LIFE GROUP, L	LC	
		Firm/Company	
	7630 NW 6th Court		
		Address	
	Pembroke Pines/Florida 33	3(124	
	<u> </u>	City/State and Zip Code	
	livemedicarequotes@gmail		
	E-mail address: (to be used for future annual report not	dification)
For further information c	oncerning this matter, please c	all:	
Erik Joseph Webster			
Name o	f Person	at () Area Code Daytir	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$35.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration 9 Division of C	Section	<u>Street Address:</u> Registration Se Division of Co	rporations
P.O. Box 632		The Centre of	
Tallahassee, l	r に 343 14	2410 N. MODIC	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO FILED ARTICLES OF ORGANIZATION

OF

2022 APR -5 AM 7: 07

DIRECT LIFE GROUP, LLC

SECRETARY OF STATE

(Name of the Limited Liability Company as it now appears on the vectors)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability	y Company were filed on $\frac{02/1}{}$	7/2022	_ and assigned
Florida document number 1.22000078986	·		
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the l	imited liability company her	<u>e</u> :	
The new name must be distinguishable and contain the words "l	Limited Liability Company," the des	ignation "LEC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
		ords, <u>enter the name o</u>	of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
(Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new regagent and/or the new registered office address here: Name of New Registered Agent:			
		, Florida	2:- (:-1:-
	• •		zsp Coae
New Registered Agent's Signature, if changing Register	ered 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.

If amending Authorized Person(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>	<u>Address</u>	Type of Action
MGR	AARON T PAUL	761 NW 66TH AVENUE	□Add
		PLANTATION, FL 33317	■Remove
			□Change
MGR	ELSA ESPARZA WEBSTER	7630 NW 6TH COURT	= Add
		PEMBROKE PINES, FL 33024	□Remove
			□ Change
			□AdJ
			□Remove
			□Change
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effective	ate, if oth	er than	the date	of filing	cannot be	e prior to da	te of tiling	or more tha	(op n 90 days a	otional) fter filing.) l	Pursuant to 60:	5.020
<u>e:</u> If th	e date inser	ted in thi	s block d	oes not n	neet the a	ipplicable	statutory	filing requ	irements,	this date w	rill not be list	ted a
iment s	effective o	ate on th	е глерағи	nem of S	iaie s rec	oras.						
eard en	cifies a del	aved offe	etive data	· but not	an effect	tive time	at 12:01 :	ım on the	earlier of:	(b) The	90th day afte	er th
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