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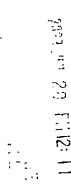
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COVER LETTER

TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

ISLAND GIRL PLANE LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Thomas W. Walters, Esq. Name of Person Thomas W. Walters, P.A. Firm/Company 499 E. Palmetto Park Rd. Stc. 209 Address Boca Raton, FL 33432 City/State and Zip Code twwlawl@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Thomas W. Walters, Esq. Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) **Mailing Address:** Street Address: Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ISLAND GIRL PLANE LLC				
(Name of the Lim	ited Liability Compa (A Florida Limited)	ny as it now appears on our re- Liability Company)	cords,)	
The Articles of Organization for this Limited 1	Liability Company	were filed on February 18, 2	2022 and assigned	
Florida document number L22000081287	·			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	In a must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Principal offices address, if applicable: S12 Bayfront Dr. Boynton Beach, FL 33435 mailing address, if applicable: dress MAY BE A POST OFFICE BOX) Iting the registered agent and/or registered office address on our records, enter the name of the new registered rethen ew registered office address here: Thomas DeFazio			
The new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the designation "	LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if appli	cable:	512 Bayfront Dr.		
(Principal office address MUST BE A STRE.	ET ADDRESS)	Boynton Beach, FL 33435		
Enter new mailing address, if applicable:			<u> </u>	
(Mailing address MAY BE A POST OFFICE	E BOX)		72	
B. If amending the registered agent and/or agent and/or the new registered office address	_	address on our records, <u>en</u>	ter the name of the new registe	
Name of New Registered Agent:	Thomas DeFaz	io		
New Registered Office Address:	512 Bayfront D	·		
	Enter Florida street address			
	Boynton Beach		, Florida <u>33435</u>	
		City	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.

Showard 15 up 0 (Jul 13 2023 11:22 FD*
If Changing Registered Agent, Signature of New Registered Agent

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>	Address	Type of Action
MGR	Zordan, Nicola	1111 S. Ocean Blvd #216	□Add
		Boca Raton, FL 33432	Remove
			□ Change
MGR	Thomas DeFazio	512 Bayfront Dr.	———— ≅Add
		Boynton Beach, FL 33435	□ Remove
			Change
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cument's e	effective date on the I	lock does not Department of	t meet the appl f State's record	icable statutory fi is.	ling requirements, th	is date will not be listed a
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ecord speci	ifies a delaved effecti	ve date hut n	ot an effective	time at 12:01 a	m on the section of ((b) The 90th day after the
is filed.		ve ditte, out it	ot all criccuse	ame, at 12.01 a.	m. on the earner of: (D) The 90th day after the
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			Winds	Zordan		: ني
			NUUDELL	· LOULIN		
_		Signature of	a member or aut	Horized representat	ive of a member	, , , , , , , , , , , , , , , , , , ,
_		Signature of	a member or au	morized representat	ive of a member	7:3 F1112