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SECRETARY OF STATE BIYISION OF CORPORATIONS

T. MATTHEWS
MAY - 6 2022

COVER LETTER

TO: Registration Sec Division of Corp			
LFTR LLC			
SUBJECT:	Name of Limi	ited Liability Company	·
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
	ndence concerning this matter		
	ISAAC MANZO, ESQ.		
		Name of Person	
	MANZO & ASSOCIATES	S, P.A.	
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	4767 NEW BROAD STRI	EET	
	•	Address	
	ORLANDO, FL 32814		
		City/State and Zip Code	
	MANZO@LAWYER.COM	I to be used for future annual report notif	Continu
For further information co	oncerning this matter, please ca		incativity
ISAAC MANZO, ESQ.		407 514-2692	
Name of	Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for the	e following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address:	
Registration S Division of Co		Registration Sec Division of Cor	
P.O. Boy 632		The Centre of T	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO FILED ARTICLES OF ORGANIZATION SECRETARY OF STATE DIVISION OF CORPORATIONS OF

22 APR 14 PM 12: 32

LFTR LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 2/11/2022 and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	J.D. MANZO	4767 NEW BROAD STREET	= Add
		ORLANDO, FL 32814	□Remove
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Add
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Effective date, if other than the famous of the factive date is listed, the date in this document's effective date on the	nust be specific and or block does not me	cannot be prior to eet the applicab	date of filing or mor le statutory filing	(option (option) (opt	tiling.) Pursuant to 60:	5.0207 (ted as t
e record specifies a delayed effec rd is filed.	tive date, but not a	in effective time	e, at 12:01 a.m. or	the earlier of: (b	The 90th day after	er the
APRIL 13		2022				
Dated			· •			
	Signature of a m	ember or authori	zed representative o	f a member		
	0.0					

Filing Fee: \$25.00