Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:	
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN Get the Lead LLC.

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June 15, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MISTORY, LLC. 100 SE 2ND ST STE 2050 MIAMI, FL 33131

SUBJECT: MISTORY, LLC. REF: L22000101280

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is L20000306937.

If you have any further questions concerning your document, please call (850) 245-6051.

KYLE D BRUMBLEY FAX Aud. #: H22000202572

Regulatory Specialist II Supervisor Letter Number: 222A00013227

Registration Section

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mistory, LLC.		····		
(Name of the Limited Liability Company as it now (A Florida Limited Liability Comp	appears on o puny)	ur records.)		
The Articles of Organization for this Limited Liability Company were filed or	on	03/11/2022	and assigned	
Florida document numberL22000101280				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability compa	iny here:			
Get the Lead LLC.				
The new name must be distinguishable and contain the words "Limited Liability Company,	." the designa	tion "LLC" or the abb	oreviation "L.L.C."	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
			350 2	
			3 3	
Enter new mailing address, if applicable:			2)	
(Mailing address MAY BE A POST OFFICE BOX)			~' \	
THE MAINTENANT COLUMN TO THE PARTY OF THE PA				
B. If amending the registered agent and/or registered office address on	our record	is, <u>enter the</u> name	e of the new regi	
agent and/or the new registered office address here:				
Name of New Registered Agent:				
Name of New Registered Agent: New Registered Office Address:				
Name of New Registered Agent: New Registered Office Address:	ger Florida st	reet address		
Name of New Registered Agent: New Registered Office Address:	uer Florida st		Zip Code	

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>	Address	Type of Action
			
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Jenisa Irizarry

						
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Dated June 10th	2	2022				

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