Florida Department of

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To:

Division of Corporations

Fax Number

: (950)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432093053

Phone fax Number : (561)694-6107 1 (561)214-9442

Enter the emmil 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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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		Clty	Zip Code
	Jupiter		, Florida <u>33458</u>
New Registered Office Address:	250 S. Central Blvd, Suite 101 Enter Florido street address		
N. 70 1 10 10 10 10 10 10 10 10 10 10 10 10	250 S. Central	Blvd Suite 101	
Name of New Registered Agent:	Michele M. Lewis, PA		
B. If amending the registered agent and/or agent and/or the new registered office addr		address on our records, <u>e</u>	nter the name of the new registere
(Mailing address MAY BE A POST OFFICE BOX)		Jupiter, FL 33458	
Enter new mailing address, if applicable:		250 S. Central Blvd, Suite	1018
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		Jupiter, FL 33458	
		250 S. Central Blvd, Suite 101B	
The new name must be distinguishable and contain the	words "Limited Liabi	ity Company," the designation	"LLC" or the abbreviation "L.L.C."
A. If amending name, enter the new name	of the limited liab	ility company here:	
This amendment is submitted to amend the fol	llowing:		
Florida document number 122000111511	·		
The Articles of Organization for this Limited	Liability Company	were filed on 3/4/2022	and assigned
(Name of the Lim	(A Florida Limited I	ny as it now appears on our re liability Company)	ecorus.)
	And I takiling Canena		The same of the sa

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.

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Cydney A. Roagan	200 Booth Rd, Suite D	DAdd
		Ormond Beach, FL 32174	Remove
			Change
MGR	Alan Izenberg	250 S. Central Blve, Suite 101B	= Add
		Jupiter, FL 33458	□Remove
			C)Change
			⊡ Add
			□Remove
			☐ Change
		<u> </u>	□Remove
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		<u></u>	□Remove
			□ Change

		 		
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ote: If the date in	ther than the date of filin	nect the applicable state	filing or more than 90 day atory filing requiremen	(optional) 75 after fliing.) Pursuant to 605.020 18, this date will not be listed a
record specifies a c l is filed.	delayed effective date, but no	t an effective time, at 12	2:01 a.m. on the earlier	of: (b) The 90th day after th
ated <u>8/23</u>	Hamille	2022 Wish	resentative of a member	

Filing Fee: \$25.00