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(Requ	uestor's Name)	
(Addr	ess)	
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(Docu	ıment Number))
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COVER LETTER

TO:

TO: Registration So Division of Cor					
DELRAY	TRIO, LLC				
SUBJECT:	Name of Lim	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Jason Lazar				
		Name of Person			
	Investments Limited				
		Firm/Company		-11-1	7022
	215 N Federal Highway				7022 EEC
		Address			o s
	Boca Raton, FL 33432			•	77
		City/State and Zip Code		: :	Ö
	jlazar@investmentslimited.			117	2
For further information of	E-mail address: (oncerning this matter, please c	to be used for future annual report not	ification)		
Jason Lazar	oneering this mater, preude e	561 392-8920			
Name o	d'Person	at ()	ne Telephone Number		
. · unic o		rica code Dayun	ne reteptione (value)		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status	
Mailing Address		Street Address:			
Registration S Division of C		Registration Se Division of Co			
P.O. Box 632	.7	The Centre of	l'allahassee		
Tallahassee, l	FL 32314	2415 N. Monro	e Street, Suite 81	0	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OELBAY Thio,	LLC	
(<u>Name of the Limited Liability Comp</u> y (A Florida Limited L	ny as it ngw appears on our record liability Company)	<u>(s.</u>)
The Articles of Organization for this Limited Liability Company Florida document number L22000115749	were filed on 03/07/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity 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)		2021
		0
Enter new mailing address, if applicable:		· , o
(Mailing address MAY BE A POST OFFICE BOX)		i
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres.	S
	, Flo	orida
	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.

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>	Name	Address	Type of Action
AMBR	ISAAC S. OHEBSHALOM IRREV	347 FIFTH AVENUE, SUITE 300	□ Add
		NEW YORK, NY 10016	■Remove
			□Change
			□Add
			□ Remove 2022 □ Change
			□Add
			Remove
			Change
			□Add
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	ate, if other than the date of fi	ot meet the applicable st	of filing or more than 90 days atutory filing requirements	optional) after filing.) Pursua i, this date will no	nt to 605.020 t be listed a
<u>ote:</u> If th	effective date on the Department	of State's records.			
ote: If the ocument'.	effective date on the Department of cifies a delayed effective date, but		12:01 a.m. on the earlier of	f: (b) The 90th o	lay after the
ocument'. record sp. Lis filed.	effective date on the Department of		12:01 a.m. on the earlier of	f: (b) The 90th o	day after the
record sp. l is filed.	effective date on the Department of cifies a delayed effective date, but	not an effective time, at	12:01 a.m. on the earlier of	f: (b) The 90th o	day after the
sote: If the locument' record specified.	effective date on the Department of cifies a delayed effective date, but tember 12	not an effective time, at	12:01 a.m. on the earlier of	f: (b) The 90th o	day after the

Filing Fee: \$25.00