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TALLAHABUEE, FLORIDA RECENTED

A. BUTLER AUG - 3 2022

COVER LETTER

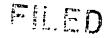
TO: Registration S Division of Co			
	N VENTURES, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Joseph N. Perlman, Esquir	c	_
		Name of Person	
	Joseph N. Perlman Law Fi	ım	
		Firm/Company	
	28461 US Highway 19 N.		
		Address	
	Clearwater, FL 33761		
		City/State and Zip Code	
	joc@perlmanlawfirm.com		
For further information	E-mail address: (concerning this matter, please c	to be used for future annual report no	ntification)
Joseph N. Periman	, p	727 536-2711	
Name	of Person	at ()	me Telephone Number
Enclosed is a check for t	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		Street Address:	anti an
Registration Division of 0		Registration Solution of Co	
P.O. Box 633		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



OF

2022 AUG -3 PM 1:53

TWOCAN VENTURES, 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 I. Florida document number L22000143737	iability Company	were filed on Ma	rch 23, 2022 and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liah	oility company he	<u>re</u> :
The new name must be distinguishable and contain the v	words "Limited Liahi	lity Company," the de	esignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)	34888 U.S. High	iway 19 North
		Palm Harbor, FI	. 34684
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	34888 U.S. High Palm Harbor, FL	·
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office a ss here:	address on our re	cords, enter the name of the new registered
Name of New Registered Agent:		- · · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	34888 U.S. Hig		
		Enter Flori	da street address
	Palm Harbor		, Florida ³⁴⁶⁸⁴
		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 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
MGR	RICHARD MURDOCK	34888 US HIGHWAY 19 NORTH	
		CLEARWATER, FL 34684	□Remove
			□Change
			□Add
		□Remove	
			□Change
	<u>.</u>		□Add
			□Remove
			Change
			□Add
		□Remove	
		□Change	
		🗆 Add	
		Remove	
			Change
			□Remove
			□ Change

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Note: If	e date, if other than the date of filing:
e record ord is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the i.
Dated A	PRIL 26 AUTONIZ of 1-0 Prosper 1 AUTO
	Signature of a member or authorized representative of a member
	JOSEPH N. PERLMAN, ESQUIRE
	Typed or printed name of signee

Filing Fee: \$25.00