## L22000183326

| (Re                     | equestor's Name)   |           |
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| (Ac                     | ddress)            |           |
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| PICK-UP                 | ☐ WAIT             | MAIL      |
| (Bu                     | usiness Entity Nam | ne)       |
| (Do                     | ocument Number)    |           |
| Certified Copies        | Certificates       | of Status |
| Special Instructions to | Filing Officer:    |           |
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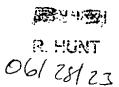
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## **COVER LETTER**

| FO: Regista con Section<br>Division of Corporations |   |  |   |                     |
|---|---|--|---|---------------------|
| SUBJECT: _ 69SSK                                    | a Gom   | Pany LLC   |   |                     |
|   | Name of Limite  | ed Laability Company                                       |   |                     |
| The enclosed $x = cs$ of Amendment:                 | and feets) are subm   | uitted for tiling  |   |                     |
|   |   |  |   |                     |
| Please return a correspondence conce                | rning this matter to  | ) the sonowing.  |   |                     |
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| , _ <del> </del>                                    |   | Name of 1950   | 13  |                     |
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|   | 7619010   | City/State and Zip Code                                    |   |                     |
| Q   | ickulclea   | un services of 6m  | nail. com                                       |                     |
|   | 11-Inail address: (t)   | <ul> <li>be used for future annual report notif</li> </ul> | ication)  |                     |
| For further into the fon concerning th              | is matter, please ca  | II:  |   |                     |
|   |   | at ()<br>Area Code — Daytime                               | : Telephone Number                              |                     |
| 's and of Person                                    |   | Area Code Daytime  | : Telephone Number                              |                     |
| Enclosed نعز tor the following                      | amount:   |  |   |                     |
| ■ \$25,00 Fili + se                                 | 0 Filing Fee &<br>ificate of Status   | ☐ \$55,00 Filing Fee &                                     | S60.00 Filing Fee. Certificate of Status &      |                     |
| Cen   | neate of Status   | Certified Copy (additional copy is enclosed)               | Certified Copy<br>(additional copy is enclosed) |                     |
|   |   |  |   |                     |
| Mailio, y ldress:                                   |   | Street Address:  |   |                     |
| Regise tion Section                                 |   | Registration Sec   |   |                     |
| Divisic of Corporation                              | 18  | Division of Cor<br>The Centre of T                         |   |                     |
| P.O. Box 6327<br>Tallah is ee, FL 32314             |   |  | e Street, Suite 810                             |                     |
|   |   |  |   |                     |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

| Lisska Comba  | ny 44.  |
|---|---|
| ( <u>Name of the Limited Liability Compan</u><br>(A Florida Limited Li  |   |
| The Articles of Organization for this Limited Liability Company v<br>Florida document number <u>L 72000 183326</u>  | were filed on 06 126/2023 and assigned                      |
| This amendment is submitted to amend the following:   |   |
| A. If amending name, enter the new name of the limited liabil   |   |
| The new name must be distinguishable and contain the words "Limited Liability                                       |   |
| Enter new principal offices address, if applicable:   | 5601 Kenlarass yr Unil                                      |
| (Principal office address MUST BE A STREET ADDRESS)   | 202, Sansola 51 34235                                       |
|   |   |
| Enter new mailing address, if applicable:   |   |
| (Mailing address MAY BE A POST OFFICE BOX)  |   |
|   | S C C C C C C C C C C C C C C C C C C C                     |
| B. If amending the registered agent and/or registered office acagent and/or the new registered office address here: | ddress on our records, enter the name of the new registered |
| Name of New Registered Agent:   |   |
| New Registered Office Address:  |   |
|   | Enter Florida street address                                |
|   | , Florida   |
|   | 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> | <u>Name</u> | Address      | Type of Action       |
|--------------|-------------|--------------|----------------------|
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| fective date, if other th  | an the date of fili     | ng:                   |   | (                  | optional)                   |                     |                            |
| fective date, if other then effective date is listed, the letter of the date inserted in | date must be specific a | nd cannot be prior to | to date of filing or<br>thle statutory fili | more than 90 days  | after filing. this date     | ) Pursua<br>will no | nt to 605.0<br>t be listed |
| cument's effective date o  | n the Department of     | State's records.      | ,   |                    |                             |                     |                            |
|  |                         |                       |   |                    |                             |                     |                            |
| ecord specifies a delayed is filed.  | effective date, but no  | ot an effective til   | me, at 12:01 a.m                            | , on the earlier o | of: (b) Th                  | ie 90th             | day after t                |
| is filed.  |                         |                       |   |                    |                             |                     |                            |
| \  | 26                      | 7023                  |   |                    |                             |                     |                            |
| ated WYC.  |                         | NIT                   | <del></del> '                               |                    |                             |                     |                            |
| ited <u>JUNC</u>   |                         | /                     |   |                    |                             |                     |                            |
| ated June  |                         | memee o autho         | <u> </u>                                    | <del></del>        |                             |                     |                            |