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| | (Requestor's Name) |
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| Special Instructions to | o Filing Officer: |
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| Name of Limi | ted Liability Company | | | |
| Amendment and fee(s) are sub- | mitted for filing. | | | |
| | _ | | | |
| Curt Bender, Esq. | | | | |
| | Name of Person | | | |
| Bender,legal, PLLC | | | | |
| | Firm/Company | <u> </u> | | |
| PO. Box 181283 | | | | |
| | Address | | | |
| Tallahassee, FL 32303 | | | | |
| curt@bender.legal | City/State and Zip Code | | | |
| E-mail address: (t | o be used for future annual report notifica- | ation) | | |
| concerning this matter, please ca | ıll: | | | |
| | 407 467-7278 | | | |
| af Person | at () | Selembona Number | 2(| |
| T COLONIA | Area code Daytime I | cicprone rannoci | 122 0 | *** |
| | | | CT | 21.000 |
| he following amount: | | 5. | 0 | 72 300 |
| ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified Copy | | M |
| | Amendment and fee(s) are substandence concerning this matter of Curt Bender, Esq. Bender, Esq. Bender, Esq. PO. Box 181283 Tallahassee, FL 32303 curt@bender.legal E-mail address: (topocerning this matter, please can be following amount: \$\Person\$ \$\$\$30.00 Filing Fee & | Name of Limited Liability Company Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: Curt Bender, Esq. Name of Person Bender, Legal, PLLC Firm/Company P.O. Box 181283 Address Tallahassee, FL 32303 City/State and Zip Code curt@bender.legal E-mail address: (to be used for future annual report notification for the following amount: 407 467-7278 at (| Amendment and fee(s) are submitted for filing. Ondence concerning this matter to the following: Curt Bender, Esq. Name of Person Bender legal, PLLC Firm/Company P.O. Box 181283 Address Tallahassee, FL 32303 City/State and Zip Code curt@bender.legal F-mail address: (to be used for future annual report notification) oncerning this matter, please call: 407 467-7278 at (| Name of Limited Liability Company Amendment and fee(s) are submitted for filing. Indexest of Person Bender, Esq. Name of Person Bender, Esq. |

TO:

Registration Section **Division of Corporations**

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (<u>Name of the Limited Liability Comp</u> (A Florida Limited | any as it now appears on our record Liability Company) | <u>s.</u>) | | |
|---|---|-----------------------------|--|--|
| The Articles of Organization for this Limited Liability Company Torida document number 1.22(XX)224640 | and assigned | | | |
| his amendment is submitted to amend the following: L. If amending name, enter the new name of the limited liab | Sites component bears | 202 : | | |
| lansa79 Commerce LLC | mity company nere: | 2022 OCT | | |
| he new name must be distinguishable and contain the words "Limited Latbi | lity Company," the designation "LLC" | or the abbreviation L.L.C." | | |
| inter new principal offices address, if applicable: | 962 Myrtle Ave, Unit 2R | | | |
| Principal office address MUST BE A STREET ADDRESS) | Brooklyn, NY 11206 | 7. F. O | | |
| | | 30 | | |
| nter new mailing address, if applicable: | 962 Myrtle Ave, Unit 2R | | | |
| lailing address MAY BE A POST OFFICE BOX) | Brooklyn, NY 11206 | | | |
| | | | | |
| If amending the registered agent and/or registered office agent and/or the new registered office address here: | address on our records, <u>enter t</u> | the name of the new regist | | |
| Name of New Registered Agent: | · · · · · · · · · · · · · · · · · · · | | | |
| New Registered Office Address: | | | | |
| | Enter Florida street address | | | |
| | , Flo | rida | | |

New Registered Agent's Signature, if changing Registered Agent:

Dunlas Commerce LLC

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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