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COVER LETTER

TO: Registration Sec Division of Corp		į.	.ev.	j A
suвјест: 🤼 р0	GEL TELL LINAME OF LIM	ited Liability Company	**	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.		
Please return all correspon	dence concerning this matter	to the following:		
	Judie Whi			
		Name of Person		
		Firm/Company		
	1000 0	510 71-		
	1000 Brickell	All SH 7-15 Address		
	Miami FC	3313 City/State and Zip Code		
	INTO (apple E-mail address: (TYLL. (M) to be used for future annual report no	otification)	
For further information co	ncerning this matter, please ca	all:		
Jocul WW Name of	Ut7el Person	at (<u>315</u>) <u>473 –</u> Area Code Days	8522 ime Telephone No	umber
Enclosed is a check for the	following amount:			
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Cer Cer	00 Filing Fee, tificate of Status & tified Copy itional copy is enclosed

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. Monroc Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Loogle Tree, LLC	2023 AUG 10 AH 8: [:
Name of the Limited Liability Comr (A Florida Limited	pany as it now appears on our records.) I Liability Company)
The Articles of Organization for this Limited Liability Compan Florida document number 17200731722.	by were filed on $\frac{511817022}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1000 Brickell Ave
(Principal office address MUST BE A STREET ADDRESS)	Ste 715
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Miami FC. 33/31 1000 Brickell Ave SH 715 Miami FL 33/31
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registerec</u>
Name of New Registered Agent:	e Whitzel
New Registered Office Address: 1000 Br	CKELL Are SH 7-15 Enter Florida street address
Miami	City , Florida 3313/

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
<u>P</u>	Luis Guerrero	lole W Flagier st	□ Add
		Ste 900	DRemove
		Miami FC 33130	
<u>P</u>	Jodie Whitzel	1000 Brickell Ave	Kdd
		Stl 715	□Remove
		Miami FL 33131	□ Change
			🗆 Add
			□Remove
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fan effective d <u>Note:</u> If the	ate, if other than date is listed, the date date inserted in the effective date on the	e must be specific is block does n	and cannot be pot meet the app	rior to date of fili plicable statutor	ng or more than 90		ng.) Pursuant to 6	
	ifies a delayed eff	ective date, but					The 90th day at	ter the
d is filed.								
d is filed.	ugust	3	.2023					
d is filed.	lugist Godie Jodie	3, Whirzy Signature 6	, 7023	uthorized represe	entative of a mem	ber		

Filing Fee: \$25.00