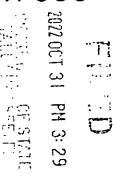
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Certified Copies	_ Certificate:	s of Status
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A. BUTLER 0CT 3 1 2022

## **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJE	Name of Limited Liability Company
The en	closed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	LENDRA BERKINS-CYAWFORD Name of Person
	Touth of Philly, LLL Firm/Company
	459 Beltry Drive

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	O	1'	المساهدة المسترا	
	01-11	) ) .		
_ loucht et	Kully	, L_L 200	PIL PIL 2	: 29
( <u>Name of the Limited</u> (.	<mark>d Liability Comp</mark> ai A Florida Limited L	ny as it now appears on diability Company)	<del>dr'records!</del> )	. <u></u> .
			re lott 202	IAIE
The Articles of Organization for this Limited Lia		were filed on	40 10 3.03	and assigned
Florida document number 1220002	61100			
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liabi	ility company here:		
The new name must be distinguishable and contain the wo	rds "Limited Liabili			
Enter new principal offices address, if applica	ble:	255 5 1 Suite 104	DRANGE	WENNE
Principal office address MUST BE A STREET		SuitE 104	#1542	
Trincipal Office dadress MOST DITTI GIRDET	711211EBBJ	ORIANDO:	FT. 328	<del>D1</del>
				<del></del>
Enter new mailing address, if applicable:				
	2010			
Mailing address MAY BE A POST OFFICE B	<u>0.0</u>	<u> </u>		
				<del></del>
3. If amending the registered agent and/or re	gistered office a	ddress on our record	ls, enter the name	of the new registered
gent and/or the new registered office address	here:			1
		D-obis	- (rally	ied
Name of New Registered Agent:	renor	a Pertins	7- 010-0 0	
New Registered Office Address:	459 F	3EHTYD	rne	
New Registered Office Address.		Enter Florida str	veet address	
	DADE	NPORT	, Florida <u> </u>	3897
		City	, 1 101 101	Zin Cada

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.

ff 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
AMBR	LENora	Berkins Cranto	rd 459 Bettry DR	i_Add
				□ Remove
				□ Change
				□ Add
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(If an ef Note:	ive date, if other than the date of filing:
he reco ord is fi	rd 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 led.
Dated	October 31st , 2022
	October 31st, 2022  Unique Grawford  Signature of a member or authorized representative of a member
	Unique Jantord Typed or printed name of signee