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(((H22000250288 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EISENBERG LEHMAN, PLLC

Account Number : I20220000059 Phone : (786)709-9323 Fax Number : (786)999-0920

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

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P	age: 4 of 7	2022-07-24 14:11:21 GMT	17869990920	From: Eisenberg Lehmar
		(((H22000250288 3))) COVER LETTE	R	
	on Section f Corporations			
INCR SUBJECT:	YO, LLC			
SOBJECT:		Name of Limited Liability Company		
The enclosed Articl	les of Amendment a	nd fee(s) are submitted for filing.		
Please return all cor	rrespondence concer	rning this matter to the following:		
	SCOTT D). LEHMAN		
		Name of Person	 -	
	EISENBE	RG LEHMAN, PLLC		
		Firm/Company		
	121 ALIL	AMBRA PLAZA, SUITE 1500		
		Address		
	CORAL C	GABLES, FL 33134		
		City/State and Zip Code	.,	
	SLEHMA	N@EISENBERGLEIIMAN.COM		
		E-mail address: (to be used for future annual	report notification)	
For further informa	tion concerning this	matter, please call;		
SCOTT LEHMAN	•	786 70	9-9323	
	ame of Person		Daytime Telephone Number	

MailingAddress:

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Registration Section Division of Corporations P.O. Box 6327

Tallaharosa El 20214

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To: Page 5 of 7

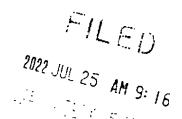
2022-07-24 14:11:21 GMT

17869990920

From: Eisenberg Lehman

(((H22000250288 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



INCRYO, 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 Liability Co	ompany were filed on 6/22/22	and assigned
Florida document number 1.22000283115		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	ESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>enter th</u>	ne name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		ida
	City	In Co.k

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.

From: Eisenberg Lehman

(((H22000250288 3)))

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	THE CRYO GROUP, LLC	4204 NATIONAL GUARD DRIVE	□Add
		PLANT CITY, FL 33563	[]Remove
			■ Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			☐ Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

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•	(((
D. If amending any other in	nformation, enter change(s) here: (Attachaa	lditional sheets, if necessary.)	
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F Effective data if where th	on the date of filing.	(antional)	
(If an effective date is listed, the	nan the date of filing:	or more than 90 days after filing.) P	ursuam to 605.0207 (3)(b)
Note: If the date inserted is document's effective date of	n this block does not meet the applicable statutory in the Department of State's records.	filing requirements, this date wi	If not be listed as the
	·		
	effective date, but not an effective time, at 12:01 a	a months earlier of: (b) The s	Orth day after the
record is filed			
Dotad JULY 24	2022		
Dated	2022 Digitally signed by Scott D Chman Lehman Date: 2022.07.24.1006:31-04:00'		
Scott D. Le	hman Hehman Date: 2022.07.24 10:06:31 -04'00'		
	Signature of a member or authorized represent	ative of a member	
SCOTT D. LEH	MAN		
	Typed or printed name of sign	1717	