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(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our record	D SSS ₹ N
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The Articles of Organization for this Limited Liability Company	were filed on 07/08/2022	end assigned
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This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company hore:	
A. If minerating name, enter the new patite of the number day	mis company neit.	
The new name must be distinguishable and contain the words "Limited Liabi	Co. Co. State design of the	Washabhanisian W. T. C. !!
The new name must be distinguishable and contain the words "Limited Liabi	tity Company," the designation "LLL	OF ICO BOOTEVISION LLLC.
Enter new principal offices address, if applicable:	4	40.7° - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
(Principal office address MUST RE A STREET ADDRESS)		
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Enter new mailing address, if applicable:	Hard and the same of the same	
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered office	address on our records, <u>enter</u>	the name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
THE PERSON OF TH	Enter Florida street addres	ış
	ri	orlda
	City	Zp 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

From: Yanet Avila

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 Momber

To:

<u>Title</u>	Name	Address	Type of Action
MGR	CARLOS GUCCIARDO	1690 NW 108TH AVE	
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		MIAMI, FL 33172	□Change
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