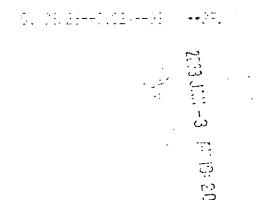
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COVER LETTER

Division of Corporations GINA ROSE INVESTMENTS, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Rachel Kotkin Name of Person Equity Advantage, Incorporated Firm/Company 10300 SW Greenburg Road, Ste 465 Address Portland, OR 97223 City/State and Zip Code worstmate@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 635-1031 Rachel Kotkin 503 Name of Person Daytime Telephone Number Enclosed is a check for the following amount: ☐ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, ■ \$25.00 Filing Fee Certificate of Status Certificate of Status & Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed)

Mailing Address:

Registration Section

TO:

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

GINA ROSE INVESTMENTS, 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 Company were filed on ______ ____ and assigned Florida document number ______1.22000309098 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 2241 Arrivas Wav Enter new principal offices address, if applicable: Melbourne FL 32940 (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address ___, Florida __

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.

City

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>	<u>Address</u>	Type of Action
MGR	Gina R. Simiele	2241 Arrivas Way, Melbourne, FL 32940	
	****		= Add
			□Remove
			□Change
MGR	Equity Advantage, Incorporated	10300 SW Greenburg Road, Ste 465, Portland, OR 97223	🗆 Add
			■Remove
			□ Change
			□Add
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ctive date, if other than the date of filing:	(optional)
effective date is listed, the date must be specific and cannot be prior to date of e: If the date inserted in this block does not meet the applicable statu	
ument's effective date on the Department of State's records.	, .
ford specifies a delayed effective date, but not an effective time, at 12 filed.	:01 a.m. on the earlier of: (b) I he 90th day after th
d December 21 2022	
^ -	