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Name of Limi	ted Liability Company			
Amendment and fee(s) are subt	nitted for filing			
indefice concerning this matter	o the following.			
HEATHER LEIGH				
	Name of Person			
DISCHINO & SCHAMY.	PLLC			
	Firm/Company		2	
4770 BISCAYNE BLVD., SUITE 600			022 C SECF	
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MIAMI, FLORIDA 33137			## A O	
ADMIN@DSMIAMI.COM	City/State and Zip Code		M IO	
E-mail address: (t	o be used for future annual report notif	ication)	一篇 -2	
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	Porations ERGY LABS LLC Name of Limi Amendment and fee(s) are subtendence concerning this matter to HEATHER LEIGH DISCHINO & SCHAMY. If A 1970 BISCAYNE BLVD., MIAMI, FLORIDA 33137 ADMIN@DSMIAMI.COM E-mail address: (to oncerning this matter, please cases of Person the following amount: \$\Begin{align*} \$30.00 Filing Fee & 20 & 20 & 20 & 20 & 20 & 20 & 20 &	Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: HEATHER LEIGH Name of Person DISCHINO & SCHAMY. PLLC Firm/Company 4770 BISCAYNE BLVD., SUITE 600) Address MIAMI, FLORIDA 33137 City/State and Zip Code ADMIN@DSMIAMI.COM E-mail address: (to be used for future annual report notification oncerning this matter. please call: 1786 Area Code Daytime The following amount: S30.00 Filing Fee & Certified Copy (additional copy is enclosed) SEE Section Groporations Street Address: Registration See Division of Cor	Porations ERGY LABS LLC Name of Limited Liability Company Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: HEATHER LEIGH Name of Person DISCHINO & SCHAMY. PLLC Firm/Company 4770 BISCAYNE BLVD SUITE 600 Address MIAMI. FLORIDA 33137 City/State and Zip Code ADMIN@DSMIAMI.COM E-inuil address: (to be used for future annual report notification) concerning this matter. please call: 1786 181-2542 181 Area Code Daytime Telephone Number Defollowing amount: 1930.00 Filing Fee & S60.00 Filing Fee & S60.0	POPATIONS ERGY LABS LLC Name of Limited Liability Company Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: HEATHER LEIGH Name of Person DISCHINO & SCHAMY, PLLC Firm/Company 4770 BISCAYNE BLVD., SUITE 6000 Address MIAMI, FLORIDA 33137 City/State and Zip Code ADMIN@DSMIAMLCOM E-mail address: (to be used for future annual report notification) The following amount: 1 S30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status & Certificate Opy (additional copy is enclosed) SECTION Registration Section Orporations SITE Address: Registration Section Division of Corporations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LIGHT ENERGY LABS 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 July 12, 2022 _____ and assigned Florida document number L22000309278 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." Enter new principal offices address, if applicable: (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

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 Changing Registered Agent, Signature of New Registered Agent

, Florida

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
MGR	TIMOTHY MOSLEY	31 NE 17th Street	
		Miami, FL 33132	
			
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D. If amending any other infor	mation, enter change(s) he	re: (Attach additione	al sheets, if necesso	иу.)		
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E. Effective date, if other than (If an effective date is listed, the date Note: If the date inserted in thi document's effective date on the	must be specific and cannot be pri s block does not meet the appl	icable statutory filing r	(optiona than 90 days after filir equirements, this da	ig.) Pursuan	t to 605. be liste	0207 (3)(ted as the
If the record specifies a delayed efferecord is filed.	ctive date, but not an effective	time, at 12:01 a.m. on	the earlier of: (b)	The 90th d	ay after	the
October 14 Dated	2022					
Dateu	,,	·				
Zayd Tio	Oct 14, 2022 16:33 EDT)					
	Signature of a member or aut	horized representative of	a member			