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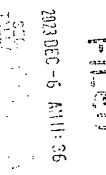
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COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Division of Cor	rporations				
Yahway Im	perial Solutions, LLC	,			
SUBJECT:					
	Name of Lim	ited Liability Company	.,		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all corresno	ondence concerning this matter	to the following:			
	Gary Johnson				
	· · · · · · · · · · · · · · · · · · ·	Name of Person			
	Gary Johnson's Accounting	& Tax Service, LLC			
	Firm/Company				
	1301 Riverplace Blvd, Suite 800-35				
		Address			
	Jacksonville, FL 32207				
	g.johnson@garyjohnsonaece	City/State and Zip Code ounting.com			
		to be used for future annual report	notification)		
For further information c	oncerning this matter, please ca	all:			
Gary Johnson			3		
		at ()	ytime Telephone Number		
Name o	f Person	Area Code Da	ytime Telephone Number		
Enclosed is a check for the	ha fallouing granupti				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	 \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) 		
<u>Mailing Addres</u> Registration 3		Street Addres Ragistration			
Division of C		•	Registration Section Division of Corporations		
P.O. Box 632	-		of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Yahway Imperial Solutions, 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 _____L22000346291 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here; Yahway Imperial Enchanted Stavs, LLC 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.

If 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>	Name	<u>Address</u>	Type of Action
MGR	Trisha Regius	10226 Curry Ford Road	· · · · · · · · · · · · · · · · · · ·
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		Suite 107 #1102	
			□Remove
		Orlando, FL 32825	₽.cu
			Change
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ective date, if other than the of a effective date is listed, the date must	late of filing:	se prime to data of 6	line or more than (W)	(optional)	405.036
(e) If the date inserted in this blo-	ck does not meet the	applicable statute	ory filing requiren	nents, this date will no	ant to 605.020 of be listed a
cument's effective date on the Dep	partment of State's re	cords.			
a tree and the second					
cord specifies a delayed effective	date, but not an effec	tive time, at 12:0	Il a.m. on the earl	ier of: (b) The 90th	day after the
s filed.					
s filed. November 27	2023				
	2023	·			
November 27	2023	·			
November 27	ignature of a member of	or authorized repres	sentative of a membe	er	

Filing Fee: \$25.00