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COVER LETTER

Division of Cor				
SUBJECT: 101	Investments	LLC		
	Name of Lun	ited Liability Company		
The enclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	John Wa	shington II Name of Person		J.
		Firm/Company		no7 SFF
	1014 N.	Adams St Address	JWash \$689 e	- 1
	Tall, f	City/State and Zip Code	Er state	D
	E-mail address: (to be used for future annual report notifi	JWash \$689 e	Smail.com
For further information co	oncerning this matter, please co	all:		
John Washi Name of	ncton, II	at (<u>850</u>) <u>222.7e</u> Area Code Daytime	795 Telephone Number	
Enclosed is a check for th	ne following amount:			
☑ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres		Street Address:	tion	
Registration S Division of C		Registration Sec Division of Cort		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

101 Investments, W	_			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears liability Company)	on our records.)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000350634</u>	were filed on	8/9/2022	and assigned	
This amendment is submitted to amend the following:			. 28	
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 Liabil	ity Company," the des	ignation "LLC" or the abb	reviation "L.L.C."	- 1 6-1
Enter new principal offices address, if applicable:			774 07:	- (C
(Principal office address MUST BE A STREET ADDRESS)			S ?	_
			9	_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. B	ex 6801 FL 32314	<i>t</i>	- -
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	nddress on our rec	eords, <u>enter the name</u>	of the new registe	- ered
				_
New Registered Office Address:	Enter Florida street address			
. Florida			Zip Code	
	City		Zip Code	_
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agroprovisions of all statutes relative to the proper and complete		. , , .		the

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 Title Name Type of Action AMBR Christopher Daniels 704 Robert: Trudie Perlans Add

Tall., Ft 323101 Remove _____ Change _____ □Remove _____ Change _____ □Remove □Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
	2707	_
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	tuo. Lu⊸ ⊐	· /
		_
		
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pur Note: It the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	rsuant to 605. I not be liste	0207 (3)(b d as the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90 record is filed.	Ith day after	the
Dated 87 9-1-2022.		
Signsture of Amember or authorized representative of a member		
John f. Wushingfu II Typed for printed name of signee		

Filing Fee: \$25.00