9/30/22, 4:25 PM

To:

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RICHARDS & PARTNERS, P.A.

Account Number : I20110000091 Phone : (305)858-9900 Fax Number : (305)285-0015

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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T. LEMIEUX

OCT - 4 2022

From: TIMOTHY RICHARDS

If Changing Registered Agent, Signature of New Registered Agent

To:

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022-09-30 21:38:19 GMT

MALIK FFRS LLC	·	
(Name of the Limited Liah (A Flori	offity Company as it now appears on our records.) The Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number 1.22000400320	Company were filed on September 15, 2022	and assigned
This amendment is submitted to amend the following:	· · ·	
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or the abbreviat	tion "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	DRESS)	
	····	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	and the second s	
	<b>9</b> .	2022
B. If amending the registered agent and/or register agent and/or the new registered office address here:	red office address on our records, enter the name of the contract of the contr	ne new registered
Name of New Registered Agent:		3
New Registered Office Address:	Enter Florida street address	ω - ω - ω
		Code
New Registered Agent's Signature, if changing Register	red Agent:	
provisions of all statutes relative to the proper and accept the obligations of my position as registered a	t and agree to act in this capacity. I further agree to complete performance of my duties, and I am familia agent as provided for in Chapter 605, F.S. Or, if this red office address, I hereby confirm that the limited l v.	tr with and document is

From: TIMOTHY RICHARDS

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	Address	Type of Action
MGR	Goinez, John	2660 SW 37TH AVE PH 8	🗀 Add
		COCONUT GROVE, FL 33133	
			☐ Change
·			□Add
			Remove
			☐ Change
***************************************			□Add
			□Remove
			Change
		□Add	
			□Remove
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*****		<del></del>	
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			□Remove
			Псь

From: TIMOTHY RICHARDS

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·		
Tective date, if other than the can effective date is listed, the date must ote: If the date inserted in this bloomment's effective date on the Department.	late of filing:	(optional) then 90 days after filing.) Pursuant to 605.020 equirements, this date will not be listed a
ecord specifies a delayed effective is filed.	date, but not an effective time, at 12:01 a.m. on	the earlier of: (b) The 90th day after the
September 20	2022	·
September 20		•
September 20		·
iteri	2022  Synapting of a member or authorized representative of	a næmber