L2200425846

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(City/State/Zip/Phone #)
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Certified Copies	Certificates of Status
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	J. HORNE
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Office Use Only



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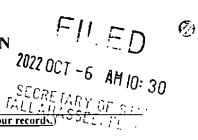
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Advanced Incorporating Service

1317 California Street P.O. Box 20396 Tallahassee, FL 32316 Phone: 850-222-CORP Fax: 850-575-2724 Email: włopez@aisincfl.com Website: www.aisincfl.com

Rack Industries CLC
FOR OFFICE USE ONLY
PICK ONE:
CERTIFIED COPYPHOTOCOPYC.U.S.
FILING:
CORPORATIONLLCLIMITED PARTNERSHIPGENERAL PARTNERSHIP
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FOREIGN QUALIFICATIONJUDGMENT LIEN
OTHER
RETRIEVAL:
GOOD STANDING CERT/C.U.SCERTIFIED COPYPHOTOCOPY
Of
APOSTILLE/NOTARY CERTIFICATION REQUEST:
Country
Amount of Documents
DATE 10/6/22 TIME
Notes:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Rack Enterprises, 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 Co	· ·	22 and assigned
Florida document number L22000425846		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
Rack Industries, LLC		
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records	s, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stre	vet address
		Florida
	Сіў	Zip Code

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>	<u>Name</u>	Address	Type of Action
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			□Remove
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ffective date, if other than an effective date is listed, the date fote: If the date inserted in the ocument's effective date on the	is block does not mee	t the applicable.	te of filing or more statutory filing re	(option than 90 days after fi equirements, this c	i al) ling.) Pursuant to 605.0. date will not be listed
record specifies a delayed effe Lis filed.	ective date, but not an	effective time,	at 12:01 a.m. on t	he earlier of: (b)	The 90th day after the
October 5	·	2022			
Jesse Rack	Signature of a men				