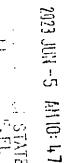
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COVER LETTER

| TO: Registration Se Division of Cor | | | |
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| SUBJECT: WOY | derland US | LLC | |
| SOBJECT. | | ited Liability Company | |
| | | | |
| The enclosed Articles of | Amendment and fee(s) are subs | mitted for filing. | |
| Please return all correspo | ndence concerning this matter t | to the following: | |
| | Nadezhda | Rashidova Name of Person | |
| | Wonderlas | nd us LLC. | |
| | | Firm/Company | • • • |
| | 5010 Sharbe | or Isles, tent of | Lauderdale |
| | Fort Laude | erdale, FL, 3331 | 18 28 |
| | <u>^</u> 1 | City/State and Zip Code USA a mai | ow Signature 1 |
| For further information c | oncerning this matter, please ca | all: | · |
| Nadezhda Name o | Rashidova | at (<u>954)</u> 5796 Area Code Daytime | G6 85 PS 5 |
| | | | |
| Enclosed is a check for the | ne following amount: | | |
| □ \$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) |
| | | Ca | |
| Mailing Addres Registration S | | <u>Street Address:</u> Registration Sect | ion |
| Division of C | Corporations | Division of Corp | orations |
| P.O. Box 632 | .7 | The Centre of Ta | llahassee |

Tallahassee, FL 32314

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ed 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 10 Florida document number <u>L22000426709</u> 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 "L.L.C." 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: Florida

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 |
|--------------|--------------|-----------|---|--|
| CEO | Nadezhda | Kashidova | 5010 Sharebor Isks, fort | 2 27Add |
| | | | 5010 Sharebor Isks, Fort Sauderdale, FL, 33312 | □Remove |
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| Effective date, if oth | ner than the date of f | filing: 11 au, 2 | 95th 2023 | option | | /05 0207 |
| rote: If the date moe | rice in any oloca does i | not moot the applicat | ble statutory filing rec | | | |
| document s effective of | date on the Department | of State's records. | | | | |
| ne record specifies a de | layed effective date, bu | it not an effective tin | ne, at 12:01 a.m. on the | he carlier of: (b) | The 90th | day,after the |
| ord is filed. | | | | | 7.4 | 923 |
| | 29th | 2023 | r | | | |
| Doved Wall | | | <u>'</u> _ • | | ٠. | 7 |
| Dated May, | | 111. | | | | |
| Dated May, | 0. | lles | | an and a | () () | |
| Dated May | Signature | of a member or author | rized representative of a | member | ALS IVI | 4H 10: 4 |