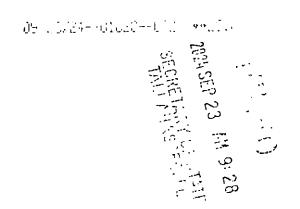
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Special Instructions to Fili	ng Officer:	
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Office Use Only



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COVER LETTER

TO: Registration So Division of Cor			·
SUBJECT: AYERWA	VES, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Wesley Ayer		
		Name of Person	1
		Firm/Company	- True SEP
	324 Mirabelle Drive		
	324 Wildoche Erive	Address	
			1,500
	Pensacola, FL 32514		
		City/State and Zip Code	
	wes_a4@protonmail.com E-mail address: (to be used for future annual report notif	ication)
For further information of	concerning this matter, please c	all:	
Wesley Ayer		at (470) 265-8975	
Name o	of Person		e Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certificate Copy (additional copy is enclosed)
Mailing Addre		Street Address:	
Registration Division of C		Registration Sec Division of Cor	
P.O. Box 632	27	The Centre of T	allahassee
Tallahassee,	FL 32314	2415 N. Monroe	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AYERWAVES, 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 10/17/2022 and assigned Florida document number <u>L22000446507</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: 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.

City

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
MGR	David Ayer		□Add
	,	324 Mirabelle Drive, Pensacola, FL 32514	≣Remove
		 	□Change
MGR	Wesley Ayer, PR of Estate of David	324 Mirabelle Drive, Pensacola, F1. 32514	≅∧dd
			□Remove
			□Change
		TALL.	Add Remove
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