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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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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S. ROBERTS

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MAY 2 3 2023

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(<u>Name of the Limited Liability</u> (A Florida	y Company as it now appe Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Liability Collision of the Collision of the Liability Co		10/10/00	and assigned
his amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limit</u>	ted liability company l	<u>iere</u> :	
the new name must be distinguishable and contain the words "Limit	ed 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 ADDRI	ESS)		20
			- 2
inter new mailing address, if applicable:			-0
			
			= = :
Mailing address MAY BE A POST OFFICE BOX)			
Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
3. If amending the registered agent and/or registered	office address on our	records, <u>enter the na</u>	10
. If amending the registered agent and/or registered	office address on our	records, <u>enter the n</u>	10
s. If amending the registered agent and/or registered gent and/or the new registered office address here:			10
3. If amending the registered agent and/or registered gent and/or the new registered office address here: Name of New Registered Agent:		records, enter the na	10
			ame of the new regis

Thereby 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 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	<u>Name</u>	Address	Type of Action
AMBR	Bijay Shrestha	3346 45th Street	X∕Add
		West Palm Beach, FL 33407	□Remove
			□Change
			□Add
			□Remove
			Change
	.		🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
		□Remove	
			☐ Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional)
(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.) Pursuant to 605 0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated May 22nd m smith Signature of a member or authorized representative of a member Nat Smith Typed or printed name of signee

Filing Fee: \$25.00