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arn in car	TRENDNIC	CS LLC			
SUBJECT	:	Name of Lim	ited Liability Company	-	
		Amendment and fee(s) are sub	_		
ricase retur	m an correspon	Christie E. Melendez	to the following.		
		-	Name of Person		
		TRENDNICS LLC			
		 	Firm/Company		
		14134 sw 100 terrace			
			Address		
		Miami - FL 33186			
		1 2070	City/State and Zip Code		
		cmele007@gmail.com E-mail address: (to be used for future annual rep	ort notification)	
For further	information co	oncerning this matter, please ca	all:		
Christie M	elendez		786 575-5		
	Name of	f Person	Area Code	Daytime Telephone N	lumber
Enclosed is	a check for th	ne following amount:			
☐ \$ 25.00	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	Ce ed) Ce	0.00 Filing Fee, entificate of Status & entified Copy Iditional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TRENDNICS LLC						
(Name of the Limited	Liability Company a A Florida Limited Liabi	s it now appears on our recor- lity Company)	<u>dş.</u>)			
The Articles of Organization for this Limited Lia Florida document number L22000454062	bility Company wer	e filed on 10/21/2022	······································	and assigned	ł	
This amendment is submitted to amend the follow	wing:					
A. If amending name, enter the new name of t	the limited liability	company here:				
Strategista Consulting LLC						
The new name must be distinguishable and contain the wo	rds "Limited Liability C	Company," the designation "LLC	C" or the abbrevia	ation "L.L.C."		
Enter new principal offices address, if applica	ble:	11351 SW 144TH Avenue Miami - FL 33186				
Principal office address MUST BE A STREET	N.					
Enter new mailing address, if applicable:		11351 SW 144TH Avenue				
Mailing address MAY BE A POST OFFICE B	$\frac{N}{N}$	liami - FL 33186		 		
B. If amending the registered agent and/or registered office address Name of New Registered Agent:	_		r the name of			
Non-Bouleton J Office Address	11351 SW 144TH A	Avenue				
New Registered Office Address:		Enter Florida street addre	SS	2012 JUL 15		
	Miami	ជ	lorida 33186		· .	
		City	Z	p Cu de	_	
New Registered Agent's Signature, if changing Re	egistered Agent:			All de 27		
				~		

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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
		/	Add
			□Remove
			□Change
			□ Add
			□Remove
			Change
			□ Add
		/	□ Remove
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ive date, if other than the date of filing:ective date is listed, the date must be specific and cannot be			nan 90 days after	filing.) Pursuant to 60
If the date inserted in this block does not meet the ap nent's effective date on the Department of State's reco		itory filing red	quirements, this	date will not be lis
the state of the s				
ord specifies a delayed effective date, but not an effecti	ive time at 12	-Olam on th	e earlier of: (b)	The 90th day aff
filed.	rve time, at 12	.01 4 011 11	e currier on (o)	The your day and
July 10				
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Unristre III é	Hende	8		
Signature of a member or	authorized repi	resentative of a	member	
Christie E. Melendez				
Tened or	printed name o	fsionee	<u>-</u>	