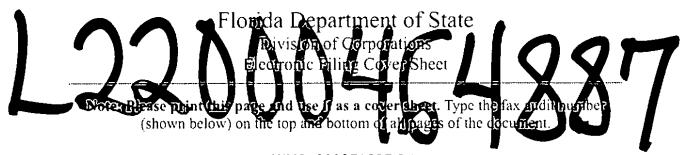
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Division of Corporations



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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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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GAIANCESTRY L.L.C.

(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 $\frac{10/28/2022}{10/28/2022}$ and assigned Florida document number L22000464887 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 "LLC." 160 W CAMINO REAL # 1153 Enter new principal offices address, if applicable: BOCA RATON, FL 33432 (Principal office address MUST BE A STREET ADDRESS) 160 W CAMINO REAL # 1153 Enter new mailing address, if applicable: BOCA RATON, FL 33432 (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:

Page: 3 of 5

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 Changing Registered Agent, Signature of New Registered Agent

. Florida _

□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

<u>Title</u>	<u>Name</u>	Address	Type of Action	
MGR	DORMI PENAFIEL, PIERINA J	9022 NW 28TH DR APT 2-312		
		CORAL SRPINGS, FL 330	65 <u>■Remove</u>	
			□Change	
AMBR	CRUZ BARRAGAN, DANIEL A	160 W CAMINO REAL # 11	53 <u>≡</u> Add	
		BOCA RATON, FL 3343	32 ⊔Remove	
			□Change	
AMBR	DORMI ANORMALIZA, PRISIO C	160 W CAMINO REAL # 11	53 ■Add	
		BOCA RATON, FL 3343	32 ⊡Remove	
			□Change	
MGR	DORMI PENAFIEL, PRISSIO G	160 W CAMINO REAL # 11	53 ■ Add	
		BOCA RATON, FL 3343	32 □Remove	
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O. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	_	
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Effective date, if other than the date of filing:	15.0207 (3)(b) ited as the	1
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 aftecord is filed.	er the	
Dated NOVEMBER 6TH 2024		
Signature of a member or authorized representative of a member		
PRISSIO G DORMI PENAFIEL		