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☐ PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Name)		
		<del></del>	
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Certified Copies	_ Certificates of	Status	
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Special Instructions to I	Filing Officer:		
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

Inone. 030 330 1300
ACCOUNT NO. : 12000000195
REFERENCE : 145298 8384787
AUTHORIZATION :
COST LIMIT : \$ 25.00
ORDER DATE: November 22, 2023
ORDER TIME : 8:16 AM
ORDER NO. : 145298-005
CUSTOMER NO: 8384787
DOMESTIC AMENDMENT FILING
NAME: EDITIDE LLC
PERCOTTE DATE
EFFECTIVE DATE:
XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Alexxis Weiland-sorenson EXT#

EXAMINER'S INITIALS:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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ART	ICLES OF O O	RGANIZATION F	
EDITIDE LLC			
( <u>Name of the Limit</u>	(A Florida Limited l	ny as it now appears on our rec Liability Company)	ords.)
The Articles of Organization for this Limited L	iability Company	were filed on	and assigned
Florida document number	·		
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
The new name must be distinguishable and contain the v	vords "Limited Liabil		
Enter new principal offices address, if applic	able:	1000 Brickell Avenue, Ste.	480
(Principal office address MUST BE A STREE	ET ADDRESS)	Miam 33131	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		1000 Brickell Avenue, Ste.	480
		Miami, FL, 33131	
•			
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our records, <u>en</u>	ter the name of the new registered
Name of New Registered Agent:	FL Internationa	al Tax Advisors, inc.	
New Registered Office Address:	1000 Brickell A	Avenue, Ste. 480	
		Enter Florida street ad	dress
	Miami	,	Florida 33131
		City	Zip Code

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.

Eduardo Fernandez

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
MGR	Alexandra Marie Holtzman	215 Kimberly Avenue	<b>≣</b> Add
		Asheville, NC 28804	□Remove
			□Change
MGR	Henry McCall Holmes VII	151 N Michigan Avenue # 1706	<b>∃</b> Add
		Chicago, IL 60601	□Remove
			☐Change
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veun	ent a crocorve date on the Department of State 8 records.
e red The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.
ated	·
	Dand
	Signature of a member or authorized representative of a member
	Signature of a member of authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00