_23000008074

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COVER LETTER

Tallahassee. FL 32314

	Registration S Division of Co				
CUB IEC	Deal Hero	o, LLC			
SUBJEC	.1:	Name of Lim	ited Liability Company	_	
The encl	osed Articles o	of Amendment and fee(s) are sub	emitted for filing.		
		pondence concerning this matter			
		Erik Ducharme			
			Name of Person		
		Deal Hero, LLC			
			Firm/Company	_	
		367 NW 42nd St.			
			Address	B	
		Boca Raton, 33431			
		.17	City/State and Zip Code	20 SE	17
		erik.ducharme@gmail.com		Z3 H	77
For furth	ier information	e-man address: o	to be used for future annual report notification) all:	2023 MAR 10 SECRETARY TALLAHA	Alexan B A
Erik Duc	charme		802 2890889	SS (2) TO (2)	
	Name	of Person	Area Code Daytime Telephone Num	nber FIATE 2: On	تبية
Enclosed	d is a check for	the following amount:			
■ \$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certif (additional copy is enclosed) Certif	Filing Fee, ficate of Status & fied Copy onal copy is enclosed)	
	Mailing Addr Registration Division of P.O. Box 63	i Section Corporations	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

Deal Hero, LLC		
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compar	ny were filed on JAN 03, 2022	and assigned
Florida document number L23000008074		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liz	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility 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)		
		2023 SEC
		AR II
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		SSO P III
		CO N
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	e address on our records, <u>enter the</u>	1 1 1 2 2 2
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Floric	
	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.

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>	<u>Address</u>	Type of Action
MGR	Erik Ducharme	367 NW 42nd St.	■ Add
		Boca Raton, FL 33431	□Remove
			□Change
AMBR	Erik Ducharme	367 NW 42nd St.	≣∧dd
		Boca Raton, FL 33431	□Remove
		 	□Change
			□Add
			SECRETARY OF
·	-	; ; ;	STAIL Remove
			□Change
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			□Remove
			□Change
			□Add
			□Remove
			□Change

		
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	(F) CO	<i>\(\frac{1}{1}\)</i>
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ctive date, if other than the date of filing:	(ontional)	
effective date is listed, the date must be specific and cannot be prior to date of filing or more than 9	0 days after filing.) Pursuant	to 605.020
te: If the date inserted in this block does not meet the applicable statutory filing require nument's effective date on the Department of State's records.	ments, this date will not t	be fisted a
·		
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ca	rlier of: (b) The 90th da	y after the
s filed.		•
March 06 2023		
A 11 \ 1		
Signature of a member or authorized representative of a mem	.b	_

Filing Fee: \$25.00