## 23000008808

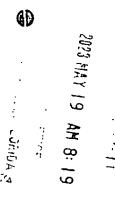
(Requestor's Name)  (Address)	6004086
(Address)	000-000
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)  Certified Copies Certificates of Status	5/19/23 VW
Special Instructions to Filing Officer:	'VW

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## **COVER LETTER**

TO: Registration Sect Division of Corpo			
SUBJECT: ×0)	ere Miari l Name of Limi	_l C	
SUBJECT: 7 PT	Name of Lim	ited Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	
	Booker I	Fryertments LL( Name of Person	<u> </u>
		Firm/Company	
	1/600 TW	67th Apt. 708	<u> </u>
	MIAMI, FL	33177 City/State and Zip Code	
	BI @ Booker E-mail address: (1	City/State and Zip Code  Investments, (on obe used for future annual report notified)	ication)
For further information con	cerning this matter, please ca	all:	
Name of P	erson	at (307) 209 - Area Code Daytime	6290 Telephone Number
Enclosed is a check for the	following amount:		
□ \$25.00 Filing Fee	☑ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Se Division of Cor P.O. Box 6327		Street Address: Registration Sec Division of Corp The Centre of T	porations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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

Xplore Mirmi L		
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) Jiability Company)	
The Articles of Organization for this Limited Liability Company	were filed on Olloy/2023	_ and assigned
Florida document number <u>L23000008808</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company." the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	<u></u>	202
	<u> </u>	ω <u>∓</u> ¬η
	>	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	50 F	***
<u></u>		<del>® 0</del>
	- in	29
3. If amending the registered agent and/or registered office a <u>igent and/or the new registered office address here</u> :	ddress on our records, <u>enter the name o</u>	f the new regis
Name of New Registered Agent:		_
New Registered Office Address:	Prove Florida and Alberta	
	Enter Florida street address	
	, Florida	
	City	Zip Code

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>	Address	Type of Action
AMOR	David Hurd	7833 rw 157 pl.	⊡ Add
		MIAMI, FL 33193	Remove
			Change
AMBR	SEA J Restalr	3381 SW 148th ct.	□Add
		MIAM; / FL 33185	E√Remove
			□Change
			□ Add
		<del></del>	□Remove
			□Change
			□Add
			□Remove
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			□ Add
		□Remove	
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			🗆 Add
			□ Remove
			□ Change

F. Effective date. If other than the date of filing:  (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)  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 ecord is filled.  Dated	D. 11 amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(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)  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 ecord is filed.  Dated		
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Signature of a member or authorized representative of a member	Dated	May 19th 2023.
		Signature of a member or authorized representative of a member
Booker Invertments		Booker Invertments Typed or printed name of signee