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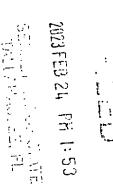
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Grandroadtitle LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	71631 SECO
Yana Manotas Name of Person	DESTRUCTION OF TALLIST
The Law Office of Yana A. M.	anotas P.A
1221 Brickoll Ave. #900,	_
Miami FL, 33131 City/State and Zip Code Vana (2) man otas law. com E-mail address: (to be used for future annual report notification)	-
Vana @ manotas law. com / E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Jana Manotas at (786) 237-74-7 Name of Person Area Code Daytime Telephone Numb	?1
Name of Terson Acea Code Payonic Perephone Name	Li
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certifie	Filing Fee, rate of Status & rd Copy al 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

iability Company as it now appears on our records.)
lorida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on <u>Yanuary 202023</u> and assigned Florida document number \(\Lambda \frac{13000038978}{}. 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 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) e/o Yana Manotas P.A.
1921 Brickell Ave.# Enter new mailing address, if applicable: (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: The Law Office of Juna A. Manobas, P.A.

1221 Brickell Ave. #900

Enter Florida street address Name of New Registered Agent: New Registered Office Address: Milumi Florida 33131

Cin 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 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>	Name	Address	Type of Action
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an effective date is listed ote: If the date insert	er than the date of filing it. It the date must be specific at the dots not ate on the Department of	nd cannot be prior to come meet the applicable	date of filing or more e statutory filing re	(option than 90 days after fil equirements, this d	ling.) Pursua	nt to 605,020 t be listed a
	ayed effective date, but no	ot an effective time	, at 12:01 a.m. on	the earlier of: (b)	The 90th o	lay after the
ecora specifies a dela is filed.						
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