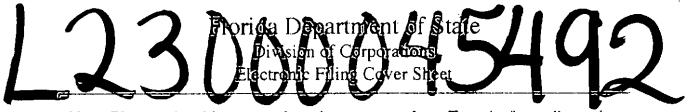
3/29/23, 4:18 PM

**Division of Corporations** 



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H230001191023)))



H230001191023ABCT

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To:

Division of Corporations

Pax Number : (850)617-6383

From:

Account Name : SWFL HOME SOLUTIONS

Account Number: I2020000001 : (239)963-4645 Phone : (844)514-6249 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DEBT EQUITY VENTURES LLC

> 0 Certificate of Status 0 Certified Copy Page Count Estimated Charge \$25.00

I. SOLOMON

MAR 3 1 2023

## H23000119/023

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Debt Equity Ventures LLC				
(Name of the Limi	ted Liability Compa (A Florida Limited)	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited L  L23000045492  Torida document number	iability Company	were filed on	and assigned	
his amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	oility company here:		
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."	
Inter new principal offices address, if applicable:		3333 RENAISSANCE BLVD Ste 208	} 	
Principal office address MUST BE A STREET ADDRESS)		Bonita Springs, FL 34134		
			- 202	
Saturation address if applicables		3333 RENAISSANCE BLVD Ste 208	2023 HAR	
Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)		Bonita Springs, FL 34134	\$30 \$30	
Maning address MAT DE AT OUT OTTICE	<u> 11031</u>	r og		
B. If amending the registered agent and/or	registered office	address on our records, enter the m	ame of the new register	
agent and/or the new registered office addre	ess here:		•	
Name of New Registered Agent:	<u></u>			
3333 RENAISSANCE BLVD Ste 208				
New Registered Office Address:	Enter Florida street oxidress			
	Bonita Springs	, Florida	34134	
		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 Changing Registered Agent, Signature of New Registered Agent

H230001191023

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Robert Draiss	3333 RENAISSANCE BLVD Stc 208	
		Bonita Springs , FL 34134	⊡Rcmove
			□Remove
			☐ Change
<u></u>			DAdd HAR CONTROL OF THE CONTROL OF T
			HAR COPPINE 26
			□Remov <del>e</del>
			□ Change
			□Add
			□Remove
			□ Change
			□Remove
			□ Change

H230001/91023

E. Effective date, if other than the date of filing:  (Optional)  (If an effective date is listed, the date must be specific and except be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (37th)  Note: If the date inserted in this block does not need the applicable statutory filing requirements, this date with 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 record is filed.  Dated  March 30H  Significant of a member or authorized representative of a member			
E. Effective date, if other than the date of filing:  (Of me effective date is issed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursamt to 605 0207 (376)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date with 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 record is filled.  Dated	-		
E. Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and connot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)  Note: If the date inserted in this block does not meet the applicable statutory filling 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 record is filted.  Dated  March 20H  Signifum of a member or authorized representative of a member	_	<u> </u>	
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Dated March 30th 3003  Signature of a member or authorized representative of a member	Note: I	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste	0207 (3)(b) d as the
Signature of a member or authorized representative of a member			the
$\alpha \wedge \alpha \wedge \alpha$	Dated _	March 30th 1/1. 2023	
$\alpha \wedge \beta \wedge \alpha$		Signature of a member or authorized representative of a member	
11.2 . ( A B   11   11   2   1		Robert Draiss - Manager Typed or printed name of signor	

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Filing Fee: \$25.00