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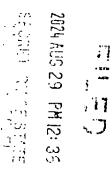
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1883°W. Royal Hunte Dr., Suite 200 Cedar City, Utah 84720 Phone 435-586-9366 Fax 435-586-9491

Jodi Shaw, paralegal Jodi@kkoslawyers.com

August 22, 2024

Department of State Division of Corporations The Center of Tallahassee 2415 N. Monroe Street Suite 810 Tallahassee, FL 32303

To Whom It May Concern:

Enclosed for processing are duplicates of the Articles of Amendment for Arty Finch L.L.C. Also enclosed is a check in the amount of \$25.00 to cover the filing fee.

If you find the enclosed document acceptable, please note your acknowledgment of receipt on the copy and return it to my office with the enclosed return envelope as noted above.

Thank you for your anticipated attention to this matter.

Very truly yours,

KYLER KOHLER OSTERMILLER & SORENSEN, LLP

Jodi Shaw Paralegal

Enclosure

Docusian Envelope ID: 0B4774AB-F239-4379-83EB-6431C5BC2BEE

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Arty Finch L.L.C. (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{01/25/2023}{1}$ Florida document number 1.23000047731 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

## 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

Docusign Envelope ID: 0B4774AB-F239-4379-83EB-6431C5BC2BEE in amending Authorized rerson(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

Title	Name	Address	Type of Action
MGR	Artem Gonchakov	3500 Coral Way, Apartment PH 213	
		Miami, Florida 33145	□Remove
			□ Add
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Note:	ive date, if other than the date of filing:  [cetive 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 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as then it's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	08/01/2024 5.43pm
	Artem: Gondakon
	Signature of a member or authorized representative of a member

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