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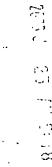
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COVER LETTER

TO: Registration Sc Division of Cor			;		
	VO RISE LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	REBECA A RODRIGUEZ	2			
		Name of Person			
	TRUST TWO RISE LLC				
		Firm/Company			
	127 N MOON AVE		7.5		
		Address	, , , , , , , , , , , , , , , , , , , ,		
	BRANDON FL 33510		Ĵ.		
		City/State and Zip Code	" :		
	REBECALILLY100@GMA				
		to be used for future annual report not	fication) 50		
For further information of	oncerning this matter, please c	all:			
REBECA A RODRIGU	EZ	813 724-4156			
Name o	t' Person	at ()	ne Telephone Number		
Enclosed is a check for the	he 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		Street Address:	ution		
Registration ! Division of C		Registration Section Division of Corporations			
P.O. Box 632	27	The Centre of	Fallahassee		
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810		

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

irust 100 Kis	e UC.	it now anyons on our records)
(Name of the Emi	(A Florida Limited Liabilit	it now appears on our records.) ty Company)
The Articles of Organization for this Limited I Florida document number <u>L230007</u>	Liability Company were	filed on 62 01 2023 and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability c	company here:
The new name must be distinguishable and contain the	words "Limited Liability Co	ompany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	ř.
		1.5
		**:
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE	<u> </u>	
B. If amending the registered agent and/or agent and/or the new registered office addresses		ess on our records, <u>enter the name of the new registe</u>
Name of New Registered Agent:	REBECA A RODRIC	GUEZ
New Registered Office Address:	127 N MOON AVE	
		Enter Florida street address
	BRANDON	33510

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
AMBR	REBECA A RODRIGUEZ	127 N MOON AVE BRANDON FL 33510	= Add
	•		□Remove
AMBR	DOMINGO ADAMES	127 N MOON AVE BRANDON FL 33510	DAdd
			≣Rémove
			□Add
			□Remove
			□Change
			□Add
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fective date, if other than the	date of filing:				(optional)	
fective date, if other than the in effective date is listed, the date imust ote: If the date inserted in this blo	be specific and canno	ot be prior to	date of filing o	or more than 90 da	ys after filing.)	Pursuant to 605.020
cument's effective date on the De			ic sudding i	ming requiremen	its, this date s	an nor the frateur
ecord specifies a delayed effective is filed.	: date, but not an ef	fective time	e, at 12:01 a.	m. on the earlie	r of: (b) The	90th day after th
JULY 05	202	23				
ited			. •			
		>				

Filing Fee: \$25.00

Typed or printed name of signee