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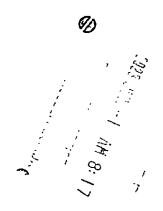
	(Requestor's Name)
	(Address)
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	(City/State/Zip/Phone #)
	(),
PICK-UF	WAIT MAIL
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	(Business Entity Name)
	(2200000 2000)
	(Document Number)
Certified Copies	Certificates of Status
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Chariel Instructions : :	Filing Officer
Special Instructions to	Hing Onicer:
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Office Use Only



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2023 JPM - 1 - 128 JUS 35



2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243	K SERVICES, INC	
Please use funds from this accound Authorization Signature: INVENTMADE LLC BUSINESS Certified Copy of ArticlesCertificate of Status	L2300081234 DOC#	
NEW FILINGS	<u>AMENDMENTS</u>	
Profit CorpNot for ProfitOfficer/DirectorLimited LiabilityDomesticationOtherCORPLLLP	XAmendment Resignation of R.A. or member Dissolution Change of Registered Agent Revocation of Dissolution Merger Conversion Amended and restated Article Statement of Authority	es.
OTHER FILINGS	REGISTERATION/QUALIFICATIONS	
Annual ReportFictitious Name	Foreign filingLimited Partnership Reinstatement	
APOSTILLE Country	Other	

EXAMINIER'S INITIALS:____

COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

1717131011 01 C	or por actions		
SUBJECT: INVENT	MADE LLC		
		mited Liability Company	
The enclosed Articles of	f Amendment and fec(s) are st	ibmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
		Name of Person	
	RS ACCOUNTING ANI	O TAX SERVICES INC	
		Firm/Company	
	10 FAIRWAY DRIVE S	UITE 306	
		Address	
	DEERFIELD BEACH, F	L 33441	
		City/State and Zip Code	
	E-mail address:	(to be used for future annual report not	fication)
For further information of	concerning this matter, please c	·	
RODRIGO P SILVA		at (954) 623-7615	
Name o	of Person		e Telcphone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
N# ₄ 231 + 3.5			
Mailing Addres Registration 5		<u>Street Address:</u> Registration Sec	etion
Division of C		Division of Con	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

j

INVENTMADE LLC	2021 1100		
(Name of the Limited Liability Comp (A Florida Limited	Any as it now appears on our records.) Liability Company)	j.	
The Articles of Organization for this Limited Liability Company	were filed on $\frac{02/14/2023}{}$ and assi	gned	
Florida document number L23000081234		<u></u>	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
NONE			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.	.C ''	
Enter new principal offices address, if applicable:	2031 WOODLANDS WAY		
Principal office address MUST BE A STREET ADDRESS)	DEERFIELD BEACH FL 33442		
			
Inter new mailing address, if applicable:	2031 WOODLANDS WAY		
Mailing address MAY BE A POST OFFICE BOX)	DEERFIELD BEACH FL 33442		
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here: Name of New Registered Agent:	ddress on our records, <u>enter the name of the new</u>	register	
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
	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

It 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

Title	<u>Name</u>	Address	Type of Action
MGR	ALEXANDRE A WRUBLESKI	2031 WOODLANDS WAY	
		DEERFIELD BEACH, FL 33442	CRemove
			⊆ Change
			□Remove
			☐ Change
			🗀 Add
			□Remove
			Change
			□Remove
			☐ Change
 			
			□Remove
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fective date, if other than in effective date is listed, the date ote: If the date inserted in the cument's effective date on the	must be specific and cannot is block does not meet il	ic applicable statu	liling or more than 90	(optional) days after filing.) Pursua nents, this date will no	ant to 605.0207 of be listed as
	ective date, but not an eff	ective time, at 12:	01 a.m. on the ear	ier of: (b) The 90th o	day after the
coord specifies a delayed effi is filed.					
ecord specifies a delayed efficient is filed. ted 05/31	. 202	3			
is filed.			- W No 131	le shy	