To: 18506176383

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Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LEAD HERO LLC

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Page Count	03
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Help

Fax: 8134365206

12/11/2024 11:29 31 PST To: 18506176383 Page: 2/4 Fax: 8134365206

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LEAD HERO LLC		
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our reconted Liability Company)	rds.)
The Articles of Organization for this Limited Liability Comp	any were filed on 03/15/2023	and assigned
Florida document number L23000134537		
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 L	iability Company," the designation "LI,	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>)
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		7
B. If amending the registered agent and/or registered offingent and/or the new registered office address here:	ice address on our records, <u>ente</u>	r the name of the new registere
agent and/or the new registered office address here.		
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street addr	KAN
		`lorida
	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.

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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

Title	<u>Name</u>	Address	Type of Action
AMBR	DAVIDSON, RYAN	7901 4TH ST N	
		STE 12401	X }Remove
		ST. PETERSBURG, FL 33702	□Change
			∐Add
			□Remove
			□Change
			□Remove
			☐ Change
			Remove
		☐ Change	
		□Add	
		URemove	
			☐ Change
			□Add
			□Remove
			□Change

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). If amending any other inform				
			,	
			<u> </u>	
Effective date, if other than the (If an effective date is listed, the date me Note: If the date inserted in this bedocument's effective date on the I	ast he specific and cannot be prior to block does not meet the applicab	o date of filing or more than 90	(optional) days after filing.) Pursuant to 608,020 nents, this date will not be listed as	7 (3)(I s the
the record specifies a delayed effects cord is filed.	ve date, but not an effective tim	ie, at 12:01 a.m. on the ear	ier of: (b) The 90th day after the	
Dated	2024	_ •		
Retine	1 2-5-2-1/ Signature of a member or author			
,	Signature of a member or authori	ized representative of a memb	сг	
Robin Jones	Typed or printed			