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COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT: DA	S Industri Name of Lin	ous Home C	<u>niverse</u>	LLC
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Sared	Name of Person		
	laus Inc	Sust rious Home	2 Universe	LLC
	6253 018	Bagdad Hwy		
	Milton P	37583 City/State and Zip Code		
	Industriouse E-mail address: (OWL CO COVA	Cation)	
For further information c	oncerning this matter, please c	all:		
Sare 2 De Name o	AVS f Person	at (850) 787 - Area Code Daytime	GG [] Telephone 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)	\$60.00 Filing F Certificate of S Certified Copy (additional copy is	Status &

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Davis Industriou	s Home	Unive	se LLG11 En
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it ida Limited Liability	now appears on c Company)	
The Articles of Organization for this Limited Liability Florida document number <u>LZ300013917</u>	Company were fi	iled on	18/73 OCT 18 Fit 3: 26
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	mited liability co	mpany here:	
The new name must be distinguishable and contain the words "Li	imited Liability Com	pany," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
The Articles of Organization for this Limited Liability Company were filed on			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	· <u></u>		
da document number LZ300013G17 amendment is submitted to amend the following: amending name, enter the new name of the limited liability company here: sw name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" r new principal offices address, if applicable: cipal office address MUST BE A STREET ADDRESS) r new mailing address, if applicable: ling address MAY BE A POST OFFICE BOX) famending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered Agent: Name of New Registered Agent: New Registered Office Address:			
		s on our record	ls, enter the name of the new registered
Name of New Registered Agent:			·
New Registered Office Address:			
•		Enter Florida sv	eet address
	Cin		
	. Сиј	y	ZIP Coae

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 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	Javed Davis	6253 Old Bagolad Hw	L X Add
		Milton Pl 32583	□Remove
			□ Change
AMBIZ	Megan Caylor	8814 John Hamm Rd	_ ∮ ∕Add
		Milton Pl 32583	□Remove
			Change
		-	🗆 Add
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Mective date, if other t	han the date of fili	ng:	10	optional)	
an effective date is listed, the	date must be specific a	and cannot be prior to date of	filing or more than 90 days	after filing.) Pursuant to 60:	5.0207
ocument's effective date	on the Department of	t meet the applicable statu f State's records.	nory ming requirement	s, this date will not be list	ed as
	effective date, but n	ot an effective time, at 12	:01 a.m. on the earlier o	of: (b) The 90th day after	er the
l is filed.					
· Ocloba-	15/	7()73			
pated October March	7 -	<u>, wus</u>			
Male	ed Ale				
- <i>'</i>	Signature of	a member or authorized repr	resentative of a member		
	7.0	Typed or printed name o	i		
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