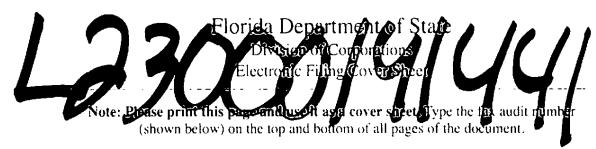
Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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 CHARGE FAST, LLC

Certificate of Status Certified Copy 0 Page Count 04 Estimated Charge \$25.00

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

¥*i 24				
* CHARGE FAST, LLC				
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	nny as it now appears on our records.) Liability Company)			
		f		
The Articles of Organization for this Limited Liability Company	were filed on 03/28/2023	and assigned		
lorida document number L23000141441				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LEC" or the a	bbreviation "L.L.C."		
Enter new principal offices address, if applicable:	17600 North Bay Road, Suite 603			
(Principal office address MUST BE A STREET ADDRESS)	Sunny Isles Beach, FL 33160			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	17600 North Bay Road, Suite 603			
	Sunny Isles Beach, FL 33160			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	 address on our records, enter the nan	ne of the new regist		
Name of New Registered Agent:				
New Registered Office Address:		-, t		
	Enter Florida street address	· Č		
	, Florida	. Θ		
	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 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
MGR	NORA DELGADO	17600 North Bay Road, Suite 603	\ \tag{\tau} Add
		Sunny Isles Beach, FL 33160	□Remove
			⊞ Change
			□ Add
		,	□Remove
		***************************************	□Change
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Effective date, if other than the fan effective date is listed, the date mu Note: If the date inserted in this bidocument's effective date on the D	a be specific and cannot be ock does not meet the a	ipplicable statutory	or more than 90 days aft	tional) er filing.) Pursuant to 605.020 ais date will not be listed a
record specifies a delayed effective	e date, but not an effect	ive time, at 12:01 a	.m. on the earlier of: ((b) The 90th day after the
d is filed.				
d is filed. October 16 Dated	2023	·		
Dated October 16				
Dated October 16	Signature of a member of		ative of a member	