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Division of Corporations

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LIONHEARTED HOUSE LLC

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10L 18 2023 T. LEMIEUX

ARTICLES OF AMENDMENT TO * ARTICLES OF ORGANIZATION OF

	,			
LIONHEARTED HOUSE LLC (Name of the Limited Liability Company as it now appear			-	
(Name of the Limited Liability Company as it now appear (A Florida Limited Liability Company)				
The Articles of Organization for this Limited Liability Company were filed on Florida document numberL23000158044	04/05/2023	and a	assigne	d
his amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability company h	ere:			
The new name must be distinguishable and contain the words "Limited Liability Company," the	designation "LLC" or the a	ppreviation '	L.L.C."	
inter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS)				
Inter new mailing address, if applicable:	***************************************		····	••
Mailing address MAY BE A POST OFFICE BOX)				
		•••		
				rist
	records, <u>enter the nar</u>	ne of the n	ew res	
3. If amending the registered agent and/or registered office address on our tagent and/or the new registered office address here:	records, <u>enter the nar</u>	ne of the n	iew reg	
gent and/or the new registered office address here:	records, <u>enter the nar</u>	ne of the n	<u>~</u> 2	
gent and/or the new registered office address here: Name of New Registered Agent:	records, <u>enter the nar</u>	ne of the n	2	
Name of New Registered Agent: New Registered Office Address:	*	ne of the n	22 23 3	
Name of New Registered Agent: New Registered Office Address:	rida street uddress	2-	28/3 Ji	
Name of New Registered Agent: New Registered Office Address:	rida street uddress	2-	28/3 Ji	
Name of New Registered Agent: New Registered Office Address: Fixer Flo	*	2-	28/3 Ji	

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>	<u>Name</u>	Address	Type of Action
MGR_	TABORGA, NATALIA A	CONDO TROJES DEL ALBA	□ Ad d
		10 ZONA TIQ COCHABAMBA BOLIV	XRemove
			Change
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). If amending any other infor	rmation, enter change(s) here: (Attach additional sheets, if necessary.)	
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 Note: If the date inserted in thi 	the date of filing:	95,0207 (3) ued as the
the record specifies a delayed effectord is filed.	ective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
Dated Jul 13	. 2023	
	Pablo Herrera Rivero Signature of a member or authorized representative of a member	
	HERRERA RIVERA, PABLO J	
	Typed or printed name of signee	

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