L23000103890

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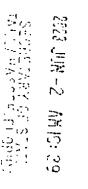
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A. RIVERS
JUL 2 9 2023



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COVER LETTER

Registration Section

Division of Corporations

TO:

SUBJECT:	Name of Lim	ited Liability Company			
m					
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Jason Browoleit				
		Name of Person			
		Firm/Company			
	22703 Camino Del Mar 24				
		Address			
	Boca Raton, FL 33433				
	-	City/State and Zip Code			
	jason.browoleit@annicando				
	E-mail address: (to be used for future annual report not	incation)		
For further information c	oncerning this matter, please c	all:			
Jason Browoleit		609 313-8035			
Name of Person		at () Area Code Daytin	ne Telephone Number		
Enclosed is a check for the	ne following amount:				
☐ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addres		Street Address:	ation		
Registration Section Division of Corporations		Registration Se Division of Co			
P.O. Box 632	-	The Centre of T	-		
Tallahassee, l	FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ares Digital LLC		
(<u>Name of the Limited Liability Cor</u> (A Florida Limit	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa	any were filed on April 03, 2023	and assigned
Florida document number L23000163890		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
Cuz Enterprises LLC		
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or the a	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)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	ce address on our records, enter the nar	1828
Name of New Registered Agent:		
New Registered Office Address:		no z
	Enter Florida street address , Florid a	15:3
	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

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	Anthony Pacifico	1 Pond View Dr Apt P-301	■Add
		Swedesboro, NJ 08085	□Remove
			☐Add
			□Remove
			Change
			□Remove
			□Change
			Remove
			TChange
			CJAdd
			□Remove
			☐ Change
			Remove
			□ Change

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ffective date, if other than t an effective date is listed, the date is lote: If the date inserted in this ocument's effective date on the	nust be specific an block does not	nd cannot be prio meet the appli	cable statutory f	r more than 90 days	optional) after filing.) Pursuan this date will not	it to 605.0207 be listed as
record specifies a delayed effect is filed.	tive date, but no	ot an effective	time, at 12:01 a.:	m. on the earlier o	of: (b) The 90th d	ay after the
ated May 05		, 2023	·			
			-			
	Signature of a	nember of aut	norized representa	live of a member		·

ET CASA