5/31/23, 4:47 PM

Division of Corporations

# Florida Department of Stage

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Division of Corporations

Fax Number : : (850)617-6383

Account Name

: WHOLE TAX PROFESSIONAL SERVICES, INC.

Account Number : 120200000179

Phone · Fax Number

: (786)253-9951 : (305)397-1052

\*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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#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Add EIN: 92-3432856

(Name of the Linu	red Liabiury Conina (A Florida Limited)	int as it now appears on our re Liability Company)	ecords.)	
The Articles of Organization for this Limited L Florida document number L23000167317	iability Company	were filed on 04/04/2023	a	nd assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name of	i the limited jiad	nuty company nere:		
The new name must be distinguishable and contain the	vords "Limited Liabi	lity Company," the designation	"LLC" or the abhrevial	ion "L.L.C."
		and a supplied to		023
Enter new principal offices address, if applie			<del></del>	
(Principal office address MUST BE A STRE)	ET ADDRESS)			
			•	
Enter new mailing address, if applicable:				<u>্ন</u>
(Majling address MAY BE A POST OFFICE	<i>ΒΟΧ</i> ) `		<u> </u>	0
			•	
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office ss here:	address on our records, g	nter the name of t	he new register
·		• ,		•
Name of New Registered Agent	YANDY ECH	EVARRIA		
New Registered Office Address:	904 W RAMB	LA ST		
	· · · · · · · · · · · · · · · · · · ·	" Enter Florida street d	uklress	
TAMPA		Florida 33612-7734		
	Cin , Florida		, Florida $\frac{33612-77}{Ztp}$	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 statues 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 60.5, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

Gandy Chevarria
If Changing Registered Sport, Signature of New Registered Agent

### H23000198260

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
MGR ECHEVARRIA, YANDY, SR		904 W RAMBLA ST	∐Add
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			🗀 Change
AMBR	YANDY ECHEVARRIA	904 W RAMBLA ST	
		TAMPA, FL 33612-7734	filRemove
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			□Remove
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			URemove
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Dated	May 31		2023.					
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	YANDY ECH							