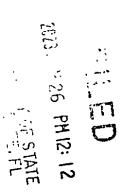
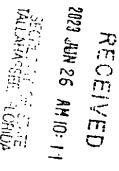
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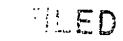
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Thank you!

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2023. - 26 PM 12: 12

. N. P. M. J. C. M. J. L. M.	
(A Florida Limited I	ny as it now appears on our records.) STATE STATE (Sability Company)
The Articles of Organization for this Limited Liability Company derida document number 1.23000214365	
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:
the new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2000 S. BAYSHORE DR.
(Principal office address MUST BE A STREET ADDRESS)	VII.I.A #32
Trincipal office limited	COCONUT GROVE, FL 33133
B. If amending the registered agent and/or registered office : agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the name of the new registere
Name of New Registered Agent:	
agent and/or the new registered office address here:	Enter Florida street address
Name of New Registered Agent:	Enter Florida street address , Florida
Name of New Registered Agent:	Enter Florida street address, Florida City Zip Code

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: 3FDA7C90-72FE-4382-9843-DEB7512DB772 trainenting Authorized rerson(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Membe

<u>Title</u>	<u>Name</u>	Address	Type of Action
	•		□Add
			□Remove
			□Change
			□Add
			□Remove
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te: If t	date, if other we date is listed, i he date inserte 's effective dat	d in this bloc	k does not n	nect the appl	icable statuto	ing or more to	(o han 90 days (quirements,	ptional) after filing.) Pursi this date will t	ant to 61 not be li	n5.02 sted :
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