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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : JELEN ACCOUNTING SERVICES, INC

Account Number : I20120000052 Phone : (305)591-9180 Fax Number : (305)591-9167

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

> > Email Address: info@jelenaccounting.com

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

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street address
, Florida
Zip Code

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>	<u>Name</u>	Address	Type of Action
AMBR	DAVID MAYA	383 NE 97TH ST	Add
		MIAMI SHORES, FL 33138	□Remove
			□Change
		_	□Add
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record specifies a delayed effective d	ate, but not an effectiv	ve time, at 12:01 a	.m. on the earlier of:	(b) The 90th day aft	er the
ated	2023				
	DAVID	MAYA			