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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : JECK, HARRIS, RAYNOR & JONES, P.A.

Account Number : I20000000210 : (561)746-1002 Fax Number : (561)775-0270

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

Email Address: bkelel@jhrjpa.com

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06/01/2023 9:41 AM

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

Virginia Or the Emilia 1214 Dill	ty Company as it now appears on our records)	_		
(A Florida	ty Company as it now appears on our records.) a Limited Liability Company)			
The Articles of Organization for this Limited Liability C Florida document number <u>L23000246060</u>	Company were filed on 05/18/2023	an	id assigne	d
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ited liability company here:			
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or t	he abbreviatio	on "L.L.C."	
Enter new principal offices address, if applicable:	178 ÷			
(Principal office address MUST BE A STREET ADDR	RESS)			
Enter new mailing address, if applicable:				
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•		<u>.</u>	20%	
(Mailing address MAY BE A POST OFFICE BOX)		- 	2033 .::	
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered	d office address on our records, enter the	name of th	£. =	
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered	d office address on our records, enter the	name of th	£. =	uistei
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>enter the</u>	name of the	£. =	tister
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered	d office address on our records, <u>enter the</u>	name of th	e new reg	ister
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address here:		name of the	e new reg	uister
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:	d office address on our records, enter the Enter Florida street address	name of the	e new res	ister
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:			e new res	cister

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.

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II amending 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 Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	WALCZAK, RENEE	10704 W 125TH PLACE	🗆 🗅 Add
		OVERLAND PARK, KS 66213	□Remove
MGRM WALCZAK, MICHAEL	WALCZAK, MICHAEL	10704 W 125TH PLACE	
		OVERLAND PARK, KS 66213	□Remove
			□Add
			Remove
		□Change	
			Remove
			□Change
			□Add
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D. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ce date, if other than the date of filing:
f the record ecord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated _	6/1/2023
	Rene Walizak
	Signature of a member or authorized representative of a member
	Renee Walczak, Managing Member
	Typed or printed name of signce