Florida Department of State Division of Comporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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

Email	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MACHINERY DEALS LLC

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BUN 0 2 2023

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Machinery Deals LLC		
(<u>Name of the Limited I</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liabi Florida document number L23000254674	lity Company were filed on 05/24/23	and assigned
This amendment is submitted to amend the followi		
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the abb	reviation "L L.C."
Enter new principal offices address, if applicabl	e:	
(Principal office address MUST BE A STREET A	ADDRESS)	
(Mailing address MAY BE A POST OFFICE BO) B. If amending the registered agent and/or regisagent and/or the new registered office address h	stered office address on our records, enter the name	
		20
Name of New Registered Agent:		2023 JUN
New Registered Office Address:		
	Enter Florida street address	_ = 5
_	Enter Florida street address Florida City istered Agent:	<u> </u>
	City	Zip Code Un
New Registered Agent's Signature, if changing Regi	stered Agent:	ည်
provisions of all statutes relative to the proper a	gent and agree to act in this capacity. I further agre ind complete performance of my duties, and I am fa ed agent as provided for in Chapter 605, F.S. Or, ij	e to comply with the miliar with and

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>	Name	Address	Type of Action
AMBR	Mark Bournan	2903 Point East Dr APT 600	XAdd
		N Miami Beach, FL 33160	□Remove
			□ Change
			□Add
			□Remove
			☐ Change
			□Add
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ffective date, if other than t	he date of fi	ling:			(optiona	1)	
an effective date is listed, the date resolver. If the date inserted in this locument's effective date on the	ust be specific block does n	and cannot be proof of meet the app	rior to date of filin dicable statutor:	R or more than 9	0 days after film	or i Pursuant to 60)5.0207 (sted as t
record specifies a delayed effec d is filed.	tive date, but	not an effective	e time, at 12:01	a.m. on the ca	rlier of: (b) 7	The 90th day aft	er the
Pated June 1st Robin June		2023	·				
p, l = 1	A.						
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