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COVER LETTER

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TO: Registration Section Division of Corporations
Takani Gazun II.
SUBJECT: Takani Group, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Wichael Bassick
Michael Bonnick Name of Person
— alcana da a a a la C
TAKAMI Group LLC Firm/Company
2800 CASA ALDMA Way
WINTER PARK FL 32792 City/State and Zip Code
MIKEBONNICK @ADL. COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Nich = 1 D = 1 12 12 12 12 12 12 12 12 12 12 12 12 1
Michael Bonnick at (631), 796-6908 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee
Certificate of Status Certified Copy Certificate of Status & Gentificate of Status & Certified Copy Certified Copy
(additional copy is enclosed
Mailing Address: Street Address:
Registration Section Registration Section
Division of Cornorations Division of Cornorations

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION AUG 29 AM 7: 16 OF

ted Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on and assigned Florida document number <u>L23000</u>264666 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

_____, Florida ___

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>ng r</u>	Michael Bonnice	2800 CASA Alona Way	VJAdd
			□Remove
			□Change
MGR	TARA Bonnick	2800 CASA Abone Way	□Add
		•	Remove
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ote:	cetive date, if other than the date of filing:
record Lis file	specifies a delayed effective date, but not an effective time, at 12:04 a.m. on the earlier of, (b). The 90th day after the d.
ated _	August 25 2023
	Signature of a member or authorized representative of a member