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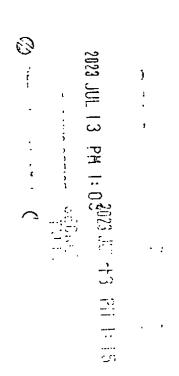
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| Special Instructions to Fi | ling Officer: | |
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Office Use Only



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COVER LETTER

| Division of Cor | rporations | * | 4 |
|---|--|---|--|
| TRES AMI | GAS LLC | · | |
| SUBJECT: | | | |
| | Name of Lin | nited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | Wendy Wagner | | |
| | EXIT Global Realty | Name of Person | |
| | <u> </u> | Firm/Company | |
| | 2499 Island dr | | |
| | Longwood, FL 32779 | Address | |
| | wendy@exitglobalrealty.co | | |
| | E-mail address: | to be used for future annual report noti | fication) |
| For further information of Wendy Wagner | concerning this matter, please of | all: 407 947-6879 | |
| None | of Person | at () Area Code Daytime | e Telephone Number |
| iname c | n Person | Area Code Dayum | e receptione Number |
| Enclosed is a check for t | he following amount: | | |
| □ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certificate of Status & Certified Copy (additional copy is enclosed) |
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| Mailing Addres | :c· | Stroot Address | |

. Registration Section

TO:

Mailing Address: Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limited Liability Compar (A Floridad Inited I. | ny as it now appears on our records.) Liability Company) |
|---|---|
| The Articles of Organization for this Limited Liability Company Florida document number <u>L33000267</u> 65.3 | were filed on 4012023 and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liabi | ility company here: |
| The new name must be distinguishable and contain the words "Limited Liabil | ity Company," the designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | 533 Versailles Or Ste 200 Maitland, Fl 32751 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 533 Versailles Dr. Ste 200 Maitland, Fl. 32751 |
| B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: | address on our records, <u>enter the name of the new registered</u> |
| Name of New Registered Agent: | Jendy Wagner ==================================== |
| New Registered Office Address: S. | Enter Florida street address Florida 3775 City Zip Cride |
| New Registered Agent's Signature, if changing Registered Agent: | <u> </u> |
| | |

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 Changing Registered Agent, Signature of New Registered Agent

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

| Title | <u>Name</u> | <u>Address</u> | Type of Action |
|-------|------------------|----------------------|----------------|
| AMBR | Kristina Peacock | 200 MAITLAND AVE #88 | |
| | | | □Add |
| | | Altamonte Springs | • |
| | | | ERemove |
| | | FL 32701 | |
| | | | Change |
| AMBR | Alena Rivera | 5210 Calabash PL | |
| | | | □ Add |
| | | Oviedo | |
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| ective date, if other than | n the date of filing: te must be specific and cannot be prior | to date of filing or more than | (optional) 90 days after filing) F | Pursuant to 605 020 |
| <u>te:</u> If the date inserted in t | this block does not meet the applic the Department of State's records | able statutory filing requir | ements, this date w | ill not be listed a |
| | | | | |
| ecord specifies a delayed en is filed. | fective date, but not an effective to | ime, at 12:01 a.m. on the e | arlier of: (b) The | 90th day after the |
| red <u>July</u> | 13 2023 | <u> </u> | | |
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Filing Fee: \$25.00