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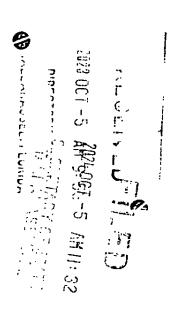
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COVER LETTER

	Registration S Division of Co			
SUBJEC		SBYMAX 97350 LLC		
SUBJEC	. I ;	Name of Li	mited Liability Company	_
The enclo	osed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please re	turn all correspo	ondence concerning this matte	r to the following:	
		EVGENIY RIKOV, CPA		
			Name of Person	Daytime Telephone Number S60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed) Certified Copy tadditional copy is enclosed)
		CFO INTERNATIONAL	LLC	
			Firm/Company	
		3500 W HALLANDALE	BEACH BLVD	
			Address	
		HOLLYWOOD, FL 3302	3	
			City/State and Zip Code	
		EUGENE@CFOINTL.CO		
For furthe	er information e	n-mail address: concerning this matter, please c	(to be used for future annual report notification)	24 OC
			can:	
EVGENI	Y RIKOV, CP/		571 314-2515 at()	io th
	Name o	f Person	Area Code Daytime Telephone Nu	mber ====================================
Enclosed	is a check for th	ne following amount:		' N
≣ \$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certified Copy senclosed Certified Copy is enclosed Certified Copy is enclosed Certified Copy is enclosed.	ficate of Status & fied Copy
H	Hailing Address Registration S	Section	Street Address: Registration Section	
	Division of C P.O. Box 632		Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAXIMUSBYMAX 97350 LLC (Name of the Limited 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 07/20/2023 __ and assigned Florida document number 1,23000343475 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 "L.L.C." Enter new principal offices address, if applicable: 3500 W HALLANDALE BEACH BLVD STE 250 (Principal office address MUST BE A STREET ADDRESS) HOLLYWOOD, FL 33023 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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida _

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	EVGENIY RIKOV	3500 W Hallandale Beach Blvd, Hollywood, FL 3	3023 <u>■</u> ≘ Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
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			DAdd
			□Remove
			□ Change

lf an et <u>Note:</u>	ive date, if other than the date of filing: 10/04/2023 (optional) (optional) (optional) (optional) (optional) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date of the date on the Department of State's records.
e reco	d 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 led.
Dated	10.4.23
	Signature of a member or authorized representative of a member
	EVGENIY RIKOV, CPA