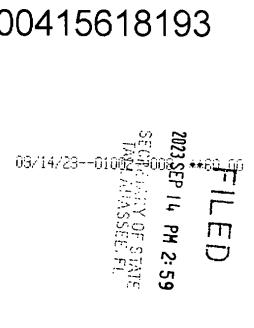
| (Requestor's Name) |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| Division of Corpo | | | |
|------------------------------|---|---|--|
| SUBJECT: Rad | 10 Flyer L | LC. | |
| | → Name of Limi | ted Liability Company | |
| | | | |
| The enclosed Articles of An | nendment and fee(s) are subr | mitted for filing. | |
| Please return all correspond | ence concerning this matter t | to the following: | |
| | Yebaterin | va Vudel Name of Person | |
| | Radio F | Same of Person Vier LLC Firm/Company | |
| | 4010 Dalu | JOOD DIVE | |
| | Holiday 1 | FL 34691 City/State and Zip Code | |
| | Radio Flyer E-mail address: (1) | o be used for future annulal report notific | COM cation) |
| For further information cond | cerning this matter, please ca | | · |
| Yehaterina Name of Po | | ar (<u></u> | 0093 |
| Name of th | li son | Area Code Dayume | Telephone Number |
| Enclosed is a check for the | following amount: | | |
| \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |

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

| Kadio Hyer LLC | | |
|--|--|--|
| (Name of the Limited Liability Con (A Florida Limit | mpany as it now appears of ted Liability Company) | on our records. |
| The Articles of Organization for this Limited Liability Compa | any were filed on | 126/2023 and assigned |
| Florida document number <u>L23000352813</u> . | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited I | iability company here | : |
| The new name must be distinguishable and contain the words "Limited L | iability Company," the desi | |
| Enter new principal offices address, if applicable: | | 7023 SEP |
| (Principal office address MUST BE A STREET ADDRESS | 2 | THE PROPERTY OF THE PROPERTY O |
| Enter new mailing address, if applicable: | | SEE S |
| (Mailing address MAY BE A POST OFFICE BOX) | | 59 |
| B. If amending the registered agent and/or registered offi agent and/or the new registered office address here: Name of New Registered Agent: | ce address on our rec | ords, enter the name of the new regis |
| | | |
| New Registered Office Address: | Enter Florido | a street address |
| | | |
| | Cuv | , Florida |

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

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|-------------------------|--------------------------|----------------------|
| MGR | Yebaterina Nudel | 4010 Dalwood Pr. Holiday | FL, 34641 _ 12Xdd |
| | | | _ □Remove |
| | | | _ Change |
| AMBR | <u>Yehaterina</u> Nudel | 4010 Dalwood Dr. Holiday | FL 34691 _ BAdd |
| | | | _ □Remove |
| | | | _ □Change |
| | | | □ Add |
| | | | _ □Remove |
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| Effec | tive date, if other than the date of filing: (optional) |
|---------------------|--|
| (If an et Note: | Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3). If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records. |
| he reco ord is f | rd 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 iled. |
| Dated | September 14. 2023. |
| | |
| | Sundaure of a member or authorized representative of a member Vehateana Nude |
| | |

Typed or printed name of signee