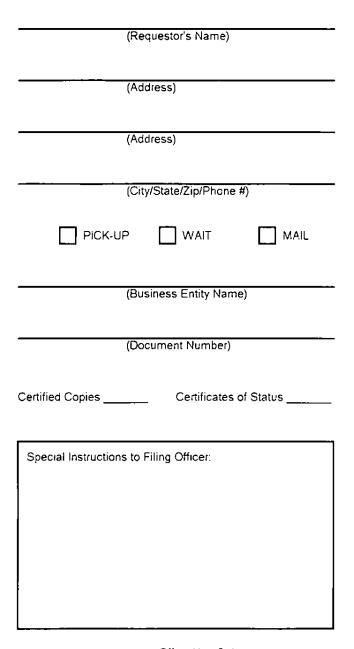
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COVER LETTER

| TO: | | istration Sect sion of Corpo | | | | | |
|---|----------------|---------------------------------|--|--|--------------------|---|--|
| SUBJEC | CT· | DMB Florida LLC | | | | | |
| 3013174 | C1. | | | | | | |
| The encl | losed | Articles of A | mendment and fee(s) are sub | mitted for tiling. | | | |
| Please re | eturn | all correspond | lence concerning this matter | to the following: | | | |
| | | | Devin Bender | | | | |
| | | | | Name of Person | | | |
| Firm/Company | | | | | | | |
| | 488 NE 18th St | | | | | | |
| | | | | Address | | | |
| | | | Miami, Fl. 33137 | | | | |
| | | | | City/State and Zip Code | | | |
| devbender17@gmail.com E-mail address: (to be used for future annual report notification) | | | | | | | |
| | | | E-mail address: (| to be used for future annual | report notificatio | n) | |
| For furth | ner in | formation con | cerning this matter, please ca | all: | | | |
| Sergio E. Bustamante | | | | | 33-2048 | | |
| _ | | Name of F | erson | at () Area Code | Daytime Tele | phone Number | |
| Enclosed | d is a | check for the | following amount: | | | | |
| \$ 25 | .00 F | iling Fee | □ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee Certified Copy (additional copy is en | | □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) | |
| Mailing Address: | | Street A | .ddress: | | | | |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee. FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| DMB Florida LLC | | | | |
|---|---|------------------|-------------------|--|
| (<u>Name of the Limited Liability Compa</u> (A Florida Limited I | ny as it now appears on our recor liability Company) | <u>ds.</u>) | | |
| The Articles of Organization for this Limited Liability Company | were filed on 7/27/2023 | | _ and assigned | |
| lorida document number L23000354710 | | | | |
| his amendment is submitted to amend the following: | | | | |
| a. If amending name, enter the new name of the limited liab | ility company here: | | | |
| Devin Bender LLC | | | | |
| he new name must be distinguishable and contain the words "Limited Liabil | lity Company," the designation "LL0 | C" or the abbro | eviation "L.L.C." | |
| Inter new principal offices address, if applicable: | | _ | | |
| Principal office address MUST BE A STREET ADDRESS) | | <u>, (/)</u> | 20: | |
| metpuroffice address most ben stress most per | | 25 | 2024 HAY | |
| | <u> </u> | 3-:- | > ; | |
| | | HAS | 7 | |
| inter new mailing address, if applicable: | | <u>&</u> | <u> </u> | |
| Mailing address MAY BE A POST OFFICE BOX) | | - ### | | |
| | | | <u>N</u> | |
| | | لتا | 2 | |
| 8. If amending the registered agent and/or registered office agent and/or the new registered office address here: | address on our records, <u>ente</u> i | the name | of the new regis | |
| Name of New Registered Agent: | | . | | |
| New Registered Office Address: | Enter Florida street addre | er | | |
| | rmer r toriaa sireet adaress | | | |
| | | lorida | Zip Code | |
| | Ciry | | zip Code | |

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.

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 |
|--------------|-------------|--------------|----------------|
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