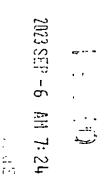
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Registration Section

Division of Corporations

Tallahassee, FL 32314

TO:

G 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ncepts Holdings, LLC			
30100.7.	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Richard H. Wilson			
		Name of Person		
	Infinity Concepts Holdings, LLC Firm/Company			
	983 Sabal Grove Dr			
		Address		
	Rocklege, FL 32955			
		City/State and Zip Code		
	rckhwilson@gmail.com			
	E-mail address: (to be used for future annual report no	otification)	
For further information of	oncerning this matter, please co	all:		
Richard H Wilson		321 412-0428		
Name c	f Person	at () Area Code Dayt	ime Telephone 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)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres		Street Address:	·	
Registration Section		Registration S		
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2023 SEP -6 AM 7: 24

Infinity Concepts Holdings, 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 8/14/2023 and assigned Florida document number L23000381372 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: (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.

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	Kimberly B. Wilson	983 Sabal Grove Dr, Rocklege, FL 32955	□Add
			Remove
			Change
AMBR	Richard H. Wilson	983 Sabal Grove Dr.	= Add
		Rockledge, FL 32955	□Remove
			Change
			🗆 Add
			🗆 Remove
			□Change
			□Add
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			□Add
			□Remove
		<u></u>	🗀 Change
			□Add
			□Remove
			Change

. It amending any other informa	ation, enter change(s) here: (Attac	ch adainonaí sneets, y necessary.)

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Effective date, if other than the (If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the E	lock does not meet the applicable statt	(optional) f filing or more than 90 days after filing.) Pursuant to 605.0207 outory filing requirements, this date will not be listed as
he record specifies a delayed effection ord is filed.	ve date, but not an effective time, at 12	2:01 a.m. on the earlier of: (b) The 90th day after the
Dated August 30	, 2023	
	Z. 1 .	
	Signature of a member or authorized rep	presentative of a member
Richard H. Wilson	Turned or printed name of	

Filing Fee: \$25.00