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023 OCT -6 PH 2:3

FILED

2023 OCT -6 PM 2: 18

COVER LETTER

1	ision of Corp				
	CAPE INFRASTRUCTURE LLC				
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	l Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspon	ndence concerning this matter	to the following:		
		FREWWORK ABERRA			
			Name of Person		
			Firm/Company		
		5329 HEALWOOD COUI		<u> </u>	
		BRADENTON FL 34211	Address		
		FREWWORKABERRA@	City/State and Zip Code		
For further i	nformation co	E-mail address: (to be used for future annual report no all:	tification)	
	K ABERRA	-	941 779-8307		
	Name of	Person	Area Code Dayti	me Telephone Number	
Enclosed is	a check for th	e following amount:			
■ \$25,00 l	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)	
	iling Addres gistration S		Street Address: Registration S	ection	
Di	vision of C	orporations	Division of Co The Centre of	orporations	
	D. Box 632 Hahassee, F		_	oe Street, Suite 810	

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our reco liability Company)	ords.)	
The Articles of Organization for this Limited Liability Company	were filed on 08/18/2023		and assigned
Florida document number 1.23000390218			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "L	LC" or the abb	
Enter new principal offices address, if applicable:		· · ·	2023
(Principal office address MUST BE A STREET ADDRESS)			
			<u> </u>
		./*	P III
Enter new mailing address, if applicable:			- 2 C
(Mailing address MAY BE A POST OFFICE BOX)		-102	<u> </u>
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>ent</u>	er the name	of the new regi
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street ado	lress	
		Florida	
	City		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
MGR	FIKIR ABERRA	5329 HEALWOOD COURT	
		BRADENTON FL 34211	≣Remove
			Change
		CAPE INFRASTRUCTURE DMCC LLC	= Add
		5329 HEALWOOD COURT	□ Remove
		BRADENTON FL 34211	□Change
			🗀 Add
			□Remove
			□ Change
			□ Add
			□Remove
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			Remove
			□Change
			□Add
			□Remove
			Chanus

AS MANAGER.					
					
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Tective date, if other than the n effective date is listed, the date must te: If the date inserted in this blocument's effective date on the December 1.	date of filing: _ t be specific and car ock does not meet	mot be prior to date t the applicable st	of filing or more tha	(optional) n 90 days after filing.) Pur irements, this date will	suant to 605.0207 not be listed as
ecord specifies a delayed effectiv is filed.	e date, but not an	effective time, at	12:01 a.m. on the	earlier of: (b) The 90	th day after the
6TH OCTOBER		2023			
		1			

Typed or printed name of signee