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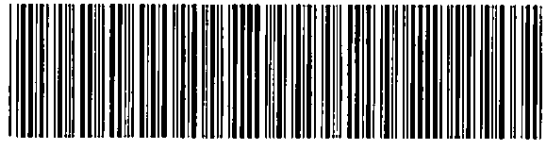
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 305 WORX LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

NAZLI DOGA MERIC, ESQ

Name of Person

305 WORX LLC

Firm/Company

11575 NW 7 AVENUE

Address

MIAMI, FL 33168

City/State and Zip Code

doga.meric@beai.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NAZLI DOGA MERIC, ESQ 305 461 2053
at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

305 WORX 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 09/01/2023 and assigned
Florida document number L23000410768

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

AM BRANCHES HOLDINGS LLC

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

City, Florida 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

Title

Name

Address

Type of Action

☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper appears to be from a notebook or a standard ruled sheet of paper. There is no handwriting or other markings on the page.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated January 24 2024

NAZLI DOGA MERIC, ESQ. Attorney on behalf of BRUNO E RAMOS, Manager

Typed or printed name of signee

NAME RELEASE AFFIDAVIT

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

BEFORE ME, the undersigned authority, duly authorized to administer oaths and take acknowledgments, personally appeared Bruno E. Ramos who, after being by me first duly cautioned and sworn upon oath, deposes and says:

1. I am over the age of 18 years, and I am authorized to make this statement on behalf of dissolved AM-BRANCHES HOLDINGS, LLC (document number L24000034030). I am the signatory/manager of UNIVERSITY RENTAL HOLDINGS, LLC (document number L22000231518) which is the Manager for dissolved AM-BRANCHES HOLDINGS, LLC.

2. AM-BRANCHES HOLDINGS, LLC has been dissolved on January 24, 2024, and the articles of dissolution is enclosed herein to this Statement (Exhibit-1).

3. 305 WORX, LLC intends to file an Amendment to the Articles of Organization to change its name to AM-BRANCHES HOLDINGS, LLC.

4. AM-BRANCHES HOLDINGS, LLC is dissolved and have no intention of revoking the dissolution or file a reinstatement.

5. AM-BRANCHES HOLDINGS, LLC hereby releases its name for use of 305 WORX, LLC so that 305 WORX, LLC can file an Amendment to the Articles of Organization and change its name to AM-BRANCHES HOLDINGS, LLC.

Further affiant sayeth not.



Bruno E. Ramos, Manager
On behalf of
Dissolved AM-BRANCHES HOLDINGS, LLC
As Manager, the UNIVERSITY RENTAL
HOLDINGS, LLC

The foregoing instrument was sworn to and subscribed before me this 27 day of
February, 2024, by Bruno E. Ramos, who is ☒ personally known to me or
☐ who produced _____ as identification.


Notary public

Nazli Doga Meric
Printed name of notary public

Seal of notary public:



Exhibit-1: Articles of Dissolution of AM-BRANCHES HOLDINGS, LLC

FILED
Jan 24, 2024
Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 605.0707, Florida Statutes, this Florida limited liability company submits the following Articles of Dissolution:

The name of the limited liability company as currently filed with the Florida Department of State:

AM-BRANCHES HOLDINGS, LLC

The document number of the limited liability company: L24000034030

The file date of the articles of organization: January 17, 2024

A description of occurrence that resulted in the limited liability company's dissolution:

WRITTEN CONSENT OF THE MEMBERS

The name and address of the person appointed to wind up the company's activities and affairs:

BRUNO E RAMOS
11575 NW 7 AVE
MIAMI, FL 33168 US

I/we submit this document and affirm that the facts stated herein are true. I/we am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: BRUNO E RAMOS

Electronic Signature of authorized person