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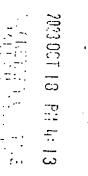
(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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Special Instructions to Filing Officer:			

Office Use Only



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COVER LETTER

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

South FL Softwost	Company as it now appears on our records.) mited Liability Company)	ning Lle	
The Articles of Organization for this Limited Liability Corr Florida document number <u>L23000 419 068</u> .		and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company here:		
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" o	or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	<u>.</u> .		
(Principal office address MUST BE A STREET ADDRES	<u></u>	2021 SE	
	Ama		
Enter new mailing address, if applicable:		<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)			
		m ω	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, enter th	e name of the new registered	
agent and of the new registered office address here.			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Flori		
	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 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

Title	Name	Address	Type of Action
MGR)	Gregory Talbot	4760 SW 83 1 Terrace, ste 1 Davie, FL 33328	XAdd
		Davie, FL 33328	□Remove
			□Change
CEO	Gragowy Talbot	4760 8W 83 EL Berrace, Ste Davie, FL 33328 (1
		Davie, FL 33328 (Remove
			□Change
			□Add
			□Remove
		C:	Change
		ラウ 会衆 +15 ラブ	Change
		7.50 6.70 7.50	© . ☐Remove;
		(17) 177 177	Change
			□Add
		·	🗆 Remove
			□Change
			🗆 Add
			□Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Per bank there cannot be a CEO of an LLC with
only one member. Must update title to
MGR (see gravious sheet)
··
the state of the s
in the second
E. Effective date, if other than the date of filing:
If the record 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 record is filed.
Dated 042, 2023
Dated 0 G Z, 2023 June provided January
Typed or printed name of signee

Filing Fee: \$25.00