Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

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From:

Account Name : INC AUTHORITY, LLC

Account Number : I20240000004 Phone : (775)329-7721 Fax Number : (775)376-9207

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: dina@soulutionlifecoaching.com

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DEFINE A GRAPORALIGHE

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SOULUTION LIFE COACHING, LLC

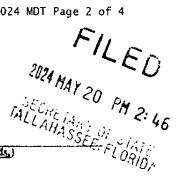
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From Corporate Service Center Inc 1.702.507.9682 Mon May 20 14:33:37 2024 MDT Page 2 of 4

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SOULUTION LIFE COACHING, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Florida Limited )	Libbility Company)	107		
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000438583</u>	were filed on 09/20/23	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:			
DINA BRADY CO				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	3680 Avalon Park E Blvd #310			
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL 32828			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
MILLION GRAPES MAT BE A POST OFFICE BOAT				
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent:		nter the name of the		
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New Registered Office Address:	Enter Florida street address Florida			
	Florid	l•		

## 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

From Corporate Service Center Inc 1.702.507.9682 Mon May 20 14:33:37 2024 MDT Page 3 of 4

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: 2024 MAY 20 PM 2: 46 Type of Action
TALLAHASSEE, FLORID! \_\_\_\_ Add MGR = Manager AMBR = Authorized Member Title **Address** Name ☐ Remove ☐ Change D Add ☐ Remove ☐ Change DbA 🖪 ☐ Remove ☐ Change □ Add ☐ Remove □ Change D Add ☐ Remove □ Change D Add ☐ Remove

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