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SECRETARY OF JAMES TALLAHASSEE, A

COVER LETTER

TO: Registration Section

Division of Corporations

CLID VECT.	LUALDI &	 LUALDI & COMPANY LLC		
SUBJECT:		Name of Lin	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	ali correspo	ndence concerning this matter	to the following:	
		ARISTOTELES RODOP	oulos	
			Name of Person	
		LUALDI & COMPANY	LLC	2
		**	Firm/Company	EC TV
		14591 WINTER STAY D	R	2023 DEC 22 SECRETAR'S TALLAILA
			Address	
		WINTER GARDEN FL 3	4787	PH 1:49 OF STATE SSEE. FL
			City/State and Zip Code	7 F
		aristotelesrodopoulos@gm		
		E-mail address: (to be used for future annual report not	ification)
For further is	nformation c	oncerning this matter, please of	all:	•
Aristoteles I	Rodopoulos		407 530-7167 at ()	
	Name of	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a	check for th	ne following amount:		
		☐ \$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	•	Street Address:	
Registration Section Division of Corporations			Registration Se Division of Co	
P.C). Box 632	7	The Centre of	Γallahass ee
Tal	lahassee, I	FL 32314	2415 N. Monro	e Street, Suite 810

Tailahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LUALDI & COMPANY LLC							
(Name of the Limited Liability Company as it now app (A Florida Limited Liability Company	ears on our records.)						
The Articles of Organization for this Limited Liability Company were filed on florida document number L23000449781	09/28/2023	and assigned					
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the limited liability company	here:						
he new name must be distinguishable and contain the words "Limited Liability Company," the	e designation "LLC" or the abbrev	iation "L.L.C."					
Enter new principal offices address, if applicable:	·····						
Principal office address MUST BE A STREET ADDRESS)		21 '					
	7.C 7.C	70.23					
	T.RET	DEC.					
inter new malling address, if applicable:	三 三	22					
Mailing address MAY BE A POST OFFICE BOX)	<i>S</i>	70					
	min	4. 44					
	٠ ا	<u> </u>					
. If amending the registered agent and/or registered office address on our	انا r records, enter the name of	-					
gent and/or the new registered office address here:							
Name of New Registered Agent:							
New Posistered Office Address							
New Registered Office Address: Enter I	lorida 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.

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	ARISTOTELES L.RODOPOULO:		□Add
			□Remove
		····	≡ Change
			
			□ Remove
			□ Add
			□Remove
			Change
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tive date, if other than the date of filing:	(optional) nan 90 days after filing.) Pursuant to 605	5.020
If the date inserted in this block does not meet the applicable statutory filing requent's effective date on the Department of State's records.		
ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the filed.	e earlier of: (b) The 90th day after	r the
DECEMBER,18 , 2023		
1/3/3		
Signature of a member or anthorized representative of a		