10/16/24, 11:04 AM

Division of Corporations



Electronic Filing Menu Corporate Filing Menu

Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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|---|---|---------------------------|------------------|----------------------|------------|
| ( <u>Name of the Limited Liability Compa</u><br>(A Florida Limited L  | ny as it new appearance (in a second | ars on our records.)      |                  |                      |            |
| The Articles of Organization for this Limited Liability Company   |   | 10/13/2023                | ai               | nd assi              | gned       |
| Florida document number <u>1,23000472449</u> .  |   |                           |                  |                      |            |
| This amendment is submitted to amend the following:   |   |                           |                  |                      |            |
| A. If amending name, enter the new name of the limited liab   | <u>ility company h</u>  | <u>nere</u> :             |                  |                      |            |
| The new name must be distinguishable and contain the words "Limited Liabil  | hty Company," the   | designation "I.I.C" of    | r the abbreviati | ion "L.L             | C."        |
| Enter new principal offices address, if applicable:   | 255 PRIMERA BOULEVARD Stc 160   |                           |                  |                      |            |
| (Principal office address MUST BE A STREET ADDRESS)   | Lake Mar  | <u>v, FL 32746</u>        |                  | <u>-</u>             |            |
| Enter new mailing address, if applicable:<br><u>(Mailing address MAY BE A POST OFFICE BOX)</u>                      | 255 PRIMI<br>Lake Mary  | ERA BOULEVA<br>. FL 32746 |                  | 20240¢T 6            |            |
| B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: | uddress on our  | records, <u>enter the</u> | ename of th      | РЖ<br>10<br>22<br>22 | registered |
| Name of New Registered Agent:   |   |                           |                  |                      |            |
| New Registered Office Address:  | Enter Fl  | orida street address      |                  |                      |            |
|   |   |                           |                  |                      |            |
|   | Cuỳ   | , Flori                   |                  | 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, <u>enter the title, name, and address of each person</u> being added or removed from our records:

## MGR = Manager AMBR = Authorized Member

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| <u>Title</u> | <u>Name</u> | Address             | <u>Type of Action</u> |
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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| ive date, if other than the date of filing: | (optiona |                |            |

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 | September 3 | 2024 |
|-------|-------------|------|
|       |             | <br> |

Signature of a member or authorized representative of a member

Tony karen

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Typed or printed name of signee

Filing Fee: S25.00