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COVER LETTER

Registration Section
Division of Corporations

Tallahassee, FL 32314

TO:

	: Investments Holding, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
	f Amendment and fee(s) are sub			
Please return all corresp	ondence concerning this matter	to the following:		
	Diana M Espino			
		Name of Person		
	Diana M Espino Name of Person Accessible Investment Holdings ,LLC Firm/Company 265 ne 87 street Address Et Portal, Florida 33138 City/State and Zip Code diana.e@squareonecap.com E-mail address: (to be used for future annual report notification)			
	Firm/Company			
	265 ne 87 street			
	Address			
	El Portal, Florida 33138			
		City/State and Zip Code		
	•		_	
			fication)	
For further information	concerning this matter, please c	ali:		
Diana M. Espino		954 8717184 at ()		
Name	of Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for t	the following amount:			
□ \$25.00 Filing Fee	■ \$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)	
Mailing Addre Registration		Street Address: Registration Se	ction	
Division of (Division of Cor		
P.O. Box 632	27	The Centre of T	fallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 HOV 13 AM 9:54

Accessible Investments Holding, 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 Compan	ny were filed on Nov 6, 2023	and assigned
Florida document number L23000502760		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
Accessible Investment Holdings, LLC		
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation "LLC" o	r 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 agent and/or the new registered office address here:	e address on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street uddress	
	, 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 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>	<u>Address</u>	Type of Action
			□ Add
			□Remove
			□Add
			□Remove
			□ Change
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ffective date, if other than the da an effective date is listed, the date must be lote: If the date inserted in this block ocument's effective date on the Depar	specific and cannot be prior does not meet the applic	r to date of filing or more cable statutory filing r	(optional) e than 90 days after filing.) Pur requirements, this date will	rsuant to 605.0207 not be listed as
	ate, but not an effective t	ime, at 12:01 a.m. on	the earlier of: (b) The 90	th day after the
is filed.	2023	<u></u> .		
record specifies a delayed effective dated is filed. November 9 ated	2023 Nova 9	—· [ain		
ated November 9	2023 Daug	· frice orized representative of	a member	· · · · · · · · · · · · · · · · · · ·