12/19/23, 10:05 AM

Division of Corporations

FloridasDepartment of State

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WELD INVESTMENTS LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

WELD INVESTMENTS 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 Company were filed on 12/08/2023 and assigned Florida document number L23000544677 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and centain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

(Principal office address MUST BE A STREET ADDRESS)	26
	<i>i.</i>
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX	
	<u> </u>
	

Name of New Registered Agent:

New Registered Office Address:

Enter Florida 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.

To

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	MARIA LUISA THORNTON	1617 N Glenellen Drive	
		Garden City, Kansas 67846	□Remove
			☐ Change
		•	□Add
			DRemove
			Change
			OAdd
			□Remove
			☐ Change
 			DAdd
			Remove
			□ Change
			bbAC
			©Remove
			OChange
			
			QRетоve
			∩ Change

To:

D. If amending any other infor	mation, enter change(s) here: (A:tach additional sheets, if necessary.)
 	
فسند في في من و وسور في موالد من مناه الكام الكام موالدان و بالدان و الكام	
-1	
	· · · · · · · · · · · · · · · · · · ·
*	

Effective date, if other than the (If an effective date is listed, the date in Nate: If the date inserted in this document's effective date on the	he date of filing:
he record specifies a delayed effectord is filed.	tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	2023
	Signature of a member or authorized representative of a member
Jorge Isaac	
Jorge Bade	Typed or printed name of signee

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605,0114 or 605,0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of

Florida	<i>l</i> .			>	NA OFMENT II O	
I. Na	me of the limited liability company:	SKY HOSE	PITAL	M YTI.	NAGEMENT, LLC	
2. (a)	136 COULTER AVENUE		(b) 136 COULTER AVENUE			
(-/	Principal office address of limited lia (Note: MUST BE STREET A		_ ` `		ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	ARDMORE, PA 19003	·		APDM	ORE, PA 19003	
	ARDIVIORE, PA 19003		_	ALDIAN	JRE, FA 19005	
		<u>-</u> .	_			
	05/02/2022			L22000	180445	
3.	Date of filing/registration in	Florida	4.	1	Document number	
5. (a)	REGISTERED AGENT	SOLUTION	N, IN	О.		
J. (4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
	155 OFFICE PLAZA DR., SUITE A					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
					2:	
	TALLAHASSEE	, FL_	3230	1	26.2.3	
(b)	Registered Agent Solut	ions, Inc.				
1-7	Enter name of NEW Registered Agent and/or NEW Registered Office address:				•	
	2894 Remington Green Ln.			in: 38		
	NEW Registered Office Address:		•		వు	
	Ste. A					
	Tallahassee	, FL_	32308	=		
the cha agent v was/we	vill be identical. Or, in the case of a b	street address of t Florida limited lial of the members of	he regis bility co the lim	tered office mpany, it is ited liability ability comp	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.	
/s/	Mackenzie Hibler			Macker	nzie Hibler, Authorized Person	

/s/	Mackenzie Hibler	Mackenzie Hibler, Authorized Person
Signatur	re of a member or authorized representative of a member	Printed or typed name of signee

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 the change.

Mackenzie Hibler, Assistant Secretary

Signature of Registered Agent

○ 12/18/2023 3:06 PM