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(Requestor's Name) (Address) (Address)	100428385311
(City/State/Zip/Phone #)	04/26/24-A01 <mark>0)4</mark> -N20 **50.00
Certified Copies Certificates of Status	
Office Use Only	

ISign Envelope ID: 5498A	ADB-8E76-4A8B-AF05-BEF0D8C5D69	VER LETTER	
TO: Registration S Division of Co	Section		
	3 Labs, LLC		
UBJECT:			
	Name of Limited	Liability Company	
The enclosed Articles (	of Amendment and fee(s) are submi	ned for filing.	
	pondence concerning this matter to		
	Brian Buchan		
		Name of Person	
	Dynamic 3 Holdings, LLC		
		Firm/Company	
	14865 Bonefish Drive		
		Address	
	Jacksonville Beach, FL 3225	50 II	
		City/State and Zip Code	
	brian.buchan1@gmail.com		
	E-mail address: (to	be used for future annual report notification)	
For further information	on concerning this matter, please ca	N:	
David Michail		310 993-5085	
. <u></u>		at () Area Code Daytime Telephone Number	
Na	me of Person		
Enclosed is a check	for the following amount:		
<b>■ \$25.00</b> Filing Fe		□ \$55.00 Filing Fee & □ \$60.00 Filing I Certified Copy (additional copy is enclosed) Certified Cop (additional copy is enclosed)	Status y
Division P.O. Boy	ion Section of Corporations	<u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

DocuSign Envelope ID: 5498AADB-8E76-4A8B-AF05-BEF0D8C5D695 AKIICLES OF AMENDMENT	
то	
ARTICLES OF ORGANIZATION	
OF	
Dynamic3 Labs, LLC	<u> </u>
(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	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
Demonsion Handleh of Filorida II C	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC"	or 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:	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>
	]
B. If amending the registered agent and/or registered office address on our records, <u>enter tagent and/or the new registered office address here</u> :	he name of the new regist
Children Desistered Agent:	
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street address	<u> </u>
, Fic	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 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

uSign Envelope II amenuing or removed f	ID: 5498AADB-8E76-4A8B-AF05-BEF0bbc5b05- Authorized rerson(s) authorized to ma from our records:	5 anage, <u>enter the title, name, and address</u>	pr each person being add
MGR = Ma $AMBR = Aa$			
Title	<u>Name</u>	Address	<u>Type of Action</u>
			□ Add
			Change
			🗆 Add
			☐Remove
			Change
			🖸 Add
			🗆 Remove
			Change
			🗆 Add
			Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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	<u>  </u>
E. Effective date, if other than the date of filing:(o (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days a (If an effective date is listed, the date must be specific and cannot be prior to date of filing requirements,	tional) (fer filing ) Pursuant to 605.0207 ()
(If an effective date is listed, the date must be specific and cannot be prior to date of hing of more than 50 days a <b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, <b>Note:</b>	this date will not be listed as the
document's effective date on the Department of State's records.	
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.	
April 15 2024 Dated,,	
DocuSigned by:	
Brian Buchan	
Signature of a member Signature of a member	
Brian Buchan, Member	
Typed or printed name of signee	<u>  </u>
Typed of Influed name of algade	