Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INC AUTHORITY, LLC

Account Number : I20240000004 Phone : (775)329-7721 Fax Number : (775)376-9207

Enter the email address for this business entity to be used for future $\overline{\dot{\psi}}$ annual report mailings. Enter only one email address please..

cbuitron8498@gmail.com Email Address:___

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CB AND GP, LLC

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From Corporate Service Center Inc 1.702.507.9682 Tue Apr 16 12:55:45 2024 MDT Page 2 of 4

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

÷.	CB AND GP, LLC	
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
ne Articles of Organization for this Limited Link	pility Company were filed on 01/05/24	and assigned
orida document number L24000015523		
is amendment is submitted to amend the follow	ring:	
If amending name, enter the new name of t	he limited liability company here:	
e new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applicab	ole:	
rincipal office address MUST BE A STREET	ADDRESS	
	and project the control of the second special projects of the special control of the control of	
nter new mailing address, if applicable:		
<u> Iailing address MAY BE A POST OFFICE BO</u>	<u> </u>	
		_
	registered office address on our records. ente	r the numerof the
gistered agent and/or the new registered offic	ce address here:	AP.2
Norman Chiang David and Access		. Te
Name of New Registered Agent:		7
New Registered Office Address:		P
	Enter Florida street address	<u> </u>
	Florida	· · · · · · · · · · · · · · · · · · ·
	Circ	Zin 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 Changing Registered Agent, Signature of New Registered Agent

. From Corporate Service Center Inc 1.702.507.9682 Tue Apr 16 12:55:45 2024 MDT Page 3 of 4 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

Title	<u>Name</u>	Address	Type of Action
MGR	George Poulos	664 102 AVE	□ Add
		N NAPLES, FL 34108	☐ Remove
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			Add
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an errech i <u>ote:</u> 15	ive date is fisted, the d	ate must be specific this block does r	e and cannot be prior not meet the applic	able statutory filing i	than 90 days after filing equirements, this date) Pursuant to 605 020' will not be listed as
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ated	April 16		2024	 ·		
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00