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Division of Corporations

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Account Name : US CONTADOR INC Account Number : I20200000121 : (770)928-2700 Phone Fax Number : (888)772-8108

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ISHIY LLC

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K. SALY FEB 1 9 2024 H24000067136 3

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.



# ISHIY LLC

(Name of the Limited Liability Company as it now annears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company Florida document number L24000030506	were filed on 01 16/2024 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	9512 PRINCE HARRY DR	
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL 32836	
Enter new mailing address, if applicable: ( <u>Mailing address M.1Y BE A POST OFFICE BOX)</u>	9512 PRINCE HARRY DR ORLANDO, FL 32836	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent	address on our records, <u>enter the name of the new registered</u>	
New Registered Office Address		
The staggarded virince radii cas	Enter Florisk: street oddress	
	, Florida	

#### 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. Thereby confirm that the limited hability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = Authorized Member Title Name | <u>Address</u> Type of Action 9512 PRINCE HARRY DR AMBR ISHIY KODAMA, RYAN ORLANDO, FL 32836 DRemove \_\_\_\_\_ 

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tive date, if other than the da ffective date is listed, the date must be If the date inscrited in this block nent's effective date on the Depa	specific and cannot be prior to date of fi does not meet the applicable statut	(option ling or more than 90 days after fi ory filing requirements, this o	ling.) Pursuant to 605.0207 (3)(b)
rd specifies a delayed effective diled.	ate, but not an effective time, at 12:	Ol a.m. on the earlier of: (b)	The 90th day after the
FEBRUARY 14TH	2024		
	The W		
	nature of a member of authorized repre		