© 02/01/2024 9:34 AM 2/1/24, 12:32 PM	. 14154847068	→ 18506176383 Division of Corporations	pg 1 of
	Note: Please print this pag	ida Department of State Division of Corporations entrome Films Cover Sheet eand use it as a cover sheet. Type he top and bottom of all pages of t	e the fax audit number
		(((H240000441013)))	
		H240000441013ABCQ	
		RESH/RELOAD button on your be so will generate another cover shee	
		<sup>6</sup> Corporations : (850)617-6383	
	Phone Fax Number **Enter the email address annual report mailing Email Address:	aber : 110432003053 : (561)694-8107 : (561)214-8442 for this business entity to ngs. Enter only one email add STATE/CORRECT OR M/M YNE L ENTERPRISE LLC Status Oy 0	IG RESIGN <sup>11</sup> STATES
	Electronic Filing Menu	Corporate Filing Menu	<b>T. LEMIEUX</b> FEB - 2 2024 Help

4

÷

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

WAYNE L ENTERPRISE LLC

(<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on <u>01/26/2024</u> and assigned Florida document number <u>L24000049650</u>.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

## Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:		SEC
Enter new maning address, in appreasies		2:5 1
(Mailing address MAY BE A POST OFFICE BOX)	·	
		AA I F
		m - SS
B. If amending the registered agent and/or registered o	ffice address on our records, en	ter the name of the new registered
agent and/or the new registered office address here:	_	S S S T
		21 ATT
		511
Name of New Registered Agent:		
New Registered Office_Address:		
<u></u>	Enter Florida street aa	ldress
		. Florida
	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.

→ 18506176383

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>	Name	Address	Type of Action
MGR	FLORIO, FLORIO, 2ND	2850 FOREST HILLS BLVD APT. 304	🗆 Add
		CORAL SPRINGS, FL 33065	
			□Change
MGR	Vincenzo Florio II	2850 FOREST HILLS BLVD APT. 304	🗐 Add
		CORAL SPRINGS, FL 33065	🗆 Remove
			□Change
			🗆 Add
			🗆 Remove
			🛛 Change
			🗆 Add
			🗆 Remove
			□Change
. <u> </u>			
			🗆 Remove
			Change
			🖸 Add
			🗆 Remove

		****		<u></u>	<u> </u>
			<b>-</b> • ·	<u></u>	
	······			 	
_					
<u></u>				 	
ective date, i	f other than the di	ate of filing:		 (option	al) ng.) Pursuant to 605.

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.

Dated		
	Tymbollyn Teller	
Si	gnature of chember or authorized representative of a member	
Tymberlyn Teefey, Attorn		
	Typed or printed name of signee	