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Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : WARD, DAMON & POSNER, P.A.

Account Number : 072262000447 Phone : (561)842-3000 Fax Number : (561)842-3626

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LUCRUM PRIVATE INVESTMENTS, LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LUCRUM PRIVATE INVESTMENTS, LLC

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|-----|------|-------|---|

| (Name of the Limited Liability Comp. (A Florida Limited | any as it now appears on our records. Liability Company) |) |
|--|--|---|
| The Articles of Organization for this Limited Liability Company Florida document number | were filed on FEBRUARY 26, 20 | ned assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liah | oility company here: | |
| The new name must be distinguishable and contain the words "Limited Liabi | lity Company," the designation "LLC" | or the abbreviation .L.C." |
| Enter new principal offices address, if applicable: | | |
| • • • | | TO PRISSE |
| (Principal office address MUST BE A STREET ADDRESS) | | ত প্ৰা |
| | <u> </u> | |
| Construction address if annihilation | | 72.0 |
| Enter new mailing address, if applicable: | | |
| (Muiling address MAY BE A POST OFFICE BOX) | *************************************** | |
| B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: | | |
| | Enter Florida street address | |
| | , Flor | rida Zip Code |
| | • | Zip Code |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agrorovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as | vee to act in this capacity. I furt performance of my duties, and | d I am familiar with and .S. Or, if this document is |

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If Changing Registered Agent, Signature of New Registered Agent

March 04, 2024 1502 To:Lucrum Private Investments, LLC - Document No. L24000099474 Fax:185 P: 4/5

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: H34000185694 3

MGR = Manager

AMBR = Authorized Member

| Title | Name | Address | Type of Action |
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| ned MARCH 4. | Signature of a member or aut | | | |

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