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COVER LETTER

Division of Co	orporations		
Solomon SUBJECT:	& Shams Enterprises Internation	nal LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The construction of Antides of	f American and English and sub-	mitted for filing	
	f Amendment and fee(s) are sub		
Please return all corresp	condence concerning this matter	to the following:	
	Michael E. Solomon		
		Name of Person	
	Solomon Jones LLP		
	_	Firm/Company	
	3530 Mystic Pointe Dr., S	uite 2703	
		Address	
	Miami, FL 33180		
		City/State and Zip Code	
	solomon@solomonjones.la		
	E-mail address: (to be used for future annual report notif	ication)
For further information	concerning this matter, please c	all:	
Michael E. Solomon		at ()	
Name	of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		Samuel Address	

TO:

Registration Section

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

25

		. 2
SOLOMON & SHAMS ENTERPRISES II		
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on our records.) ida Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on February 29, 2024	and assigned
Florida document number L.24000106028	. ,	
	<u>—</u> ·	
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the li</u>	mited liability company here:	
SOLOMON GLOBAL HOLDINGS GROUP LLC		
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADI	ORFSS)	
Trincipal Office data ess MOST DE A STREET ADE	ZKESS)	
Control of the last of the las		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here	· · · · · · · · · · · · · · · · · · ·	ame of the new regis
<u>Len una or menera registerea ornee wateren mere</u>		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Lave F to that Mi eet baarem	
	Florida	
	Ciţ	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.

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>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Change
			🗀 Add
			□Remove
			□Change
			□ Add
			Remove
			□Change
			🗆 Add
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Effective date, if other than the d If an effective date is listed, the date must b	ate of filing:		(opt	ional)
If an effective date is listed, the date must be Note: If the date inserted in this bloc	e specific and cannot be pr k does not meet the app	ior to date of filing of dicable statutory fi	r more than 90 days afte ling requirements, th	er filing.) Pursuant to 605.0 iis date will not be listed
document's effective date on the Dep	artment of State's recor	ds.		
e record specifies a delayed effective or ird is filed.	date, but not an effective	e time, at 12:01 a.n	n, on the earlier of: (b) The 90th day after t
JANUARY 27 Dated	2025	·		- 6
	<u> </u>			- 6
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(M	ignature of a member or at	thorized representat	ive at a member	

Filing Fee: \$25.00