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(((H24000166689 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 Phone : (844)449-3624 Fax Number : (512)597-0678

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COVER LETTER

H24000166689 3

The enclosed Articles of Amendment and fee(s) are submitted for filling. Please return all correspondence concerning this matter to the following: Patrick Ridoutt Name of Pe ZenBusiness INC Firm/Comp 336 E. College Ave Suite 301 Address Tallahassee, FL 32301 City/State and ZenBusiness.com E-mail address: (to be used for future) For further information concerning this matter, please call: c/o ZenBusiness INC 844 at (7					
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SUBJEC	TT: _	~			alted Liability Compan	V	······	
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	Division of Corporations Two Nord of his LLC Name of Limited Liability Company Name of Person Zendoute Correspondence concerning this matter to the following: Patrick Ridoute Name of Person Zendoutess INC Firm Company 336 E. College Ave Suite 301 Address Tullahassee, FL 32801 City/Nata and Zip Code fulfillment@Zenbusiness.com E-mail address: to be used for future annual report notification) rither information concerning this matter, please call: endusiness INC Name of Person 44 493-6249 Name of Person Tallahassee Certificate of Status Certificate of Status & Certificate Copy radditional copy is enclosed) MailingAddress: Registration Section Registration Section							
Division of Corporations Two Nords at LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filling. Please return all correspondence concerning this matter to the following: Patrick Ridoutt Name of Person ZenBusiness INC FirmsCompany 330 E. College Ave Suite 301 Address Trillahassee, FL 32301 City/Nate and Zip Crole fulfillment/@combusiness.com E-mail address (to be used for future annual report notification) For further information concerning this matter, please call: e/o ZenBusiness INC Name of Person Set S25.00 Filling Fee Certificate of Status Certificate of Status MaillmeAddress: StreetAddress: StreetAddress:								
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			Name of Limited Liability Company Set of Amendment and fee(s) are submitted for filing. Patrick Ridoutt Patrick Ridoutt Name of Person ZenBusiness INC FirmCompany 336 E. College Ave Suite 301 Address Trallahassee, FL 32301 ChyName and Zip Code fulfillment@zenbusiness.com E-mail address: (to be used for future annual report notification) tion concerning this matter, please call: NC at 443-6249 and of Person Area Code Daytime Telephone Number for the following amount: ce S30.00 Filing Fee & Certificate of Status Certificate of Status Certificate of Status StreetAddress: Registration Section					
				E-mail address: (to be used for future a	anual report notificatio	n)	
For furth	er info	ormation co	nceming this	matter, please c	all:			
c/o Zenl	Busine	ess INC				493-6249		
		Name of	Person			Daytime Tele	phone Number	
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Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

2024-05-08 12:52:10 UTC+14

18506176383

From: ZenBusiness User

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H240001666893

(Name of the Limited Linbility Company as (A Florida Limited Linbility Company were Florida document number 1.24000117152				
	<u> </u>			
Florida document number 1.24000117152				
This amendment is submitted to amend the following:	company harm:			
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 Co	ompany," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable: 53	79 Lyons Rd 708 Coconut Creek, FL 33073-2810			
(Principal office address MUST BE A STREET ADDRESS) Br	oward County US			
	79 Lyons Rd 708 Coconut Creek, FL 33073-2810			
(Mailing address MAY BE A POST OFFICE BOX) Br	Broward County US			
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	ess on our records, <u>enter the name of the new registere</u>			
Name of New Registered Agent:				
Name of New Registered Agent: New Registered Office Address:				
·	Enter Florida street oddress			
New Registered Office Address:	Enter Florida street address, Florida City Zip Code			

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Page: 4 of 5

MGR = Manager

2024-05-08 12:52:10 UTC+14

18506176383

From: ZenBusiness User

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 <u>Title</u> Name Address Type of Action _____ 🗆 🗆 🗆 🗆 🗀 Add _____ 🗆 Remove ______ Change ____ DAdd _____ □Remove _____ []Change _____ Cladd ☐ Remove ______ □Change _____ □ Add _____ □Change _____ □ Kemove ☐ Change

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From: ZenBusiness User

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fective date, if other than the neffective date is fixed, the date mater of the date inserted in this becament's effective date on the E	st be specific and cannot be prior to lock does not meet the applicat	odate of illing or more than 90	days after liting.) Pursuant to 605.	,020 ed as
ecord specifies a delayed effective stilled	re date, but not an effective tim	e, at 12:01 a.m. on the car	lier of: (h) The 90th day after	r the
05/07	2024	-·		
/s/ Cassandra				