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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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	TUCK B.	red Liability Compan	v as it now appears o	n our records	.)		
. 36 .	(Anthe of the Digit	(A Florida Limited Li	mounty Company)	, ,			
Ag,			Glada 7	3/15/2	024	and ass	ioned
The Articles of	Organization for this Limited L	iability Company v	vere nied on	7,-10		000 000	
Florida docume	nt number <u> </u>	5//					
This amendmen	it is submitted to amend the foll	owing:					
A. If amending	g name, enter the new name o	of the limited liabil	lity company here	:			
•			<u>-</u>				
The new name mus	st be distinguishable and contain the	words "Limited Liabili					.E.C.
Enter new prin	ncipal offices address, if appli	cable:	16255.	SW 27	57481	<i>-</i>	
•	e address MUST BE A STRE		16255. Hõml	STEAD	FL 3	3631	
<u> </u>							
Enter new mai	lling address, if applicable:		16255 . Homes	SW 27	5.th 57		
Mailing addre	SS MAY BE A POST OFFICE	BOX)	Homes	TEAD	<u>FZ 3</u>	<u> 303/</u>	<u> </u>
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B. If amending	g the registered agent and/or	registered office a	ddress on our rec	ords, <u>enter</u>	the name	of the ne	w registere
agent and/or the	he new registered office addr	ess here:				<u>'</u> .	, s
						<u>;</u>	TT :
Name	of New Registered Agent:		·		<u></u>	- (3) -	
Name I	Registered Office Address:	:			1	· ·	Ti
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				Et.	nrida 🕇	6,	
			City	F4	T	∰ Code	 ;
New Registered	Agent's Signature, if changing	Registered Agent:					Ø {

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:

<u>itle</u>	Name	<u>Address</u>	Type of Act
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	Signature of a member or authorized representative of a member	
	Y'AMMINIC UL G INFOLUTE OT WITHAMAN	
	Javier R bbs	•

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