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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INC AUTHORITY, LLC

Account Number : I20240000004 Phone : (775)329-7721 Fax Number : (775)376-9207

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.[4].

phreshhtshop@gmail.com Email Address:___

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PHRESHH-T CI (Name of the Limited Liability Comma (4 Florada Limited L					
The Articles of Organization for this Limited Liability Company were filed on 03/25/24 and assigned Florida document number 1.24000145795					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liah	ility company here:				
The new name areast he distinguishable and contain the words "Limited Liabi	sry Company," the designation "LLC" of	r the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)					
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>			
B. If amending the registered agent and/or registered o	Clan address on AUT PAGOTÁS				
b. If amending the registered agent and/or registered office address her	E:	CD CD			
Name of New Registered Agent:		13			
New Registered Office Address:	Enter Florida street address	77 5			
	. Flori	lda			
	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.

If Changing Registered Agent, Signature of New Registered Agent

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

lide	<u>Name</u>	Address	Type of Action
MGR	Tania Thomas	2111 Gachet Court Apt 208	Add
		Orlando, FL 32807	☐ Remove
			☐ Change
			□ Remave
			O Change
			Add
			☐ Remove
			□ Change
			D Add
			□ Remove
			Change
			Add
			☐ Remove
			□ Change
			□ A₫d
			□ Remove
			☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: N/A (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(h) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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. Signature of a thomber of atherized spresentative of a member Tania Thomas

From Corporate Service Center Inc 1.702.507.9682 Wed May 8 13:41:16 2024 MDT Page 4 of 4

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Page 3 of 3

Typed or printed name of signee

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