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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RCA ACCOUNTING SERVICES CORP

Account Number : I20180000102 Phone : (305)799-7633 Fax Number : (305)564-6857

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN YAMDELL LLC

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T. LEMIEUX Halpy 0 9 2024

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

YAMDELL LLC	•				
(Name of the L)	mited Liability Company as it now appears (A Fionds Limited Liability Company)	on one tecolds')	· <del></del> -		
The Articles of Organization for this Limited					
Florida document number L24000196645			and assigned		
This amendment is submitted to amend the fo	ollowing:				
A. If amending name, enter the new name of the limited liability company here:					
The new name must be distinguishable and contain the	e words "Limited Liability Company," the des	ignation "LLC" or the	abbreviation "I I C"		
Enter new principal offices address, if appl	licable:		- Library		
(Principal office address MUST BE A STRE			2324 5.4		
Enter new mailing address, if applicable:			65		
(Mailing address MAY BE A POST OFFICE	E BOX)				
			71 · · · · · · · · · · · · · · · · · · ·		
B. If amending the registered agent and/or agent and/or the new registered office addr	registered office address on our rece ess berg:	ords, <u>enter the nap</u>	ne of the new registe		
Name of New Registered Agent:	GEOFFREY JOHN WADDELL				
New Registered Office Address:	8180 NW 36TH ST SUITE 407				
		street address			
	DORAL.	, Florida <sup>3</sup>	3166		
New Registered Agent's Signature, if changing	City Registered Agents	·	Zip Code		

## 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>	Address	Type of Action
AMBR	GEOFFREY JOHN WADDELL	8180 NW 36TH ST SUITE 407	Type of Action
		DORAL, FL 33166	_
			□ Remove
			Chenge
AMBR	GEOFF JOHN WADDELL	8180 NW 36TH ST SUITE 407	_
	<del></del>	DOBAL EL 2017	□Add
		DORAL, FL 33166	= Remove
			□Change
			□Remove
			□Change
	<del></del>		
			□ Add
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Effective date, if o	other than the date of filing:
If an effective date is lis <b>Note:</b> If the date ins	isted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02
document's offered	nserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at the Openium of State's records.
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	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
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