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2024 SEP 23 FM 12: 22 SEATLANTA'S SEF TENT

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Divi	sion of Corp	porations			
	AMSO ECOMMERCE LLC Name of Limited Liability Company				
SUBJECT: \					
The enclosed	Articles of .	Amendment and fee(s) are sub-	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Lilly Perez			
			Name of Person		
		American Social			
			Firm/Company		
	1401 E Broward Blvd, S305				
	Address				
	Fort Lauderdale, FL 33301				
		lilly@american.social	City/State and Zip Code		
			to be used for future annual report i	notification)	
For further in	iformation c	oncerning this matter, please ea	all:		
Richard Mija	ires		305 725-6911		
	Name o	f Person	at () Area Code Day	time Telephone Number	
Enclosed is a	check for th	ne following amount:			
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section		Street Address Registration			
Division of Corporations P.O. Box 6327				Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMSO ECOMMERCE LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it n <u>ow appears on our reco</u> r Liability Company)	<u>(ds.)</u>
The Articles of Organization for this Limited Liability Company lorida document number 1.24000208167	were filed on	and assigned
this amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	oility company here:	
AMERICAN SOCIAL ECOMMERCE LLC		
he new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LI	.C" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		<u> </u>
Principal office address MUST BE A STREET ADDRESS)		2024 TA
		Tr B
nter new mailing address, if applicable:		## 23 8
Mailing address MAY BE A POST OFFICE BOX		SSC TO
		<u>F</u> 5
		平台 22
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, <u>ente</u>	r the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr	PSS
	isher i korka sireet akko	to r
	I	Florida
	(ii)	7.17× Oza

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>	Name	<u>Address</u>	Type of Action		
			□Add		
			□Remove		
			☐Change		
			□Add		
			□Remove		
			□Change		
			□Add		
			□Remove		
			☐Change		
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		· · · · · · · · · · · · · · · · · · ·	□Change		
			□Add		
			□Remove		
			□Change		
					
			□Remove		

______ □Change

D. If amending any other info	ormation, enter change(s) here: (Attach additional sheets, if necessary.)
	
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Note: If the date inserted in the	the date of filing:
f the record specifies a delayed eff ecord is filed.	fective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated August 1st	2024
-	Signature of a member or aluborized representative of a member
	RICHARD MIJARES
	Typed or printed name of signee

Filing Fee: \$25.00