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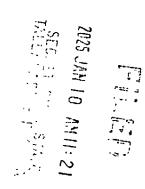
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Docusign Envelope ID: 6E471032-E480-4F11-9036-44981CD4E5DD COVER LETTER

Tallahassee, FL 32314

TO: Registration So Division of Con			
OUTD IN OW	SOCIATES LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Dana Hines		
		Name of Person	
	Weiss Law		
		Firm/Company	
	6919 SW 18th Street, Suite	: C228	
		Address	
	Boca Raton, FL 33433		
	dhines@weisslawyers.com	City/State and Zip Code	
For further information of	e-mail address: (i	to be used for future annual report not	uncation)
Dana Hines		305 405-3687	
Name o	of Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration	Section	Street Address: Registration S	
Division of C P.O. Box 633		Division of Co The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Docusign Envelope ID: 6E471032-E480-4F11-9036-44981CD4E5DD

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMO ASSOCIATES LLC		
(<u>Name of the Limited</u> (/	Liability Company as it now app A Florida Limited Liability Compan	oears on our records.) y)
The Articles of Organization for this Limited Lia	bility Company were filed on	May 13, 2024 and assigned
Florida document number L24000222724	·	
his amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company	here:
he new name must be distinguishable and contain the wor	ds "Limited Liability Company," the	ne designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applical	ole:	
Principal office address MUST BE A STREET ADDRESS)		नित्र हैं
		(1)
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE B	<u>OX)</u>	
		<u>68</u>
3. If amending the registered agent and/or registered office address	<u>here</u> :	r records, <u>enter the name of the new regist</u>
Name of New Registered Agent:	Weiss Law	
New Registered Office Address:	6919 SW 18th Street, Suite C2	
		Florida street address
	Boca Raton	, Florida 33433
	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.

Signed by:

Lam Weiss

If Changing Registered Agent, Signature of New Registered Agent

Docusign Envelope ID: 6E471032-E480-4F11-9036-44981CD4E5DD

11 amending Authorized rerson(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

Title	Name	Address	Type of Action
AMBR	MICHAEL ORBACH	19505 BISCAYNE BLVD, SUITE 2350	□Add
		AVENTURA, FL 33180	= Remove
			Change
			□Add
			Remove
			Change
			□Add
			□Remove
		 	□Change
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			☐ Change
			□ Add
			□Remove

				
				
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Effective date, if other than the if an effective date is listed, the date municipal of the date inserted in this blue document's effective date on the D	st be specific and cannot be prior lock does not meet the applic	r to date of filing or more than cable statutory filing requir	(optional) 90 days after filing.) Pursuant to ements, this date will not be	605.0207 (listed as t
e record specifies a delayed effectiv rd is filed.	e date, but not an effective t	ime, at 12:01 a.m. on the e	arlier of: (b) The 90th day :	ifter the
Dated January 9	2025			
DocuSigned by:				
an or				
MA GY BO248A9F8AAD420	Signature of a member or auth	orized representative of a mel	nber	