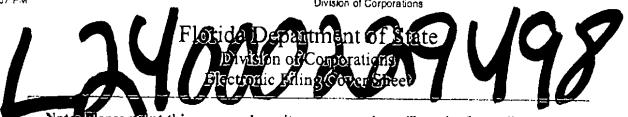
Division of Corporations



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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ሃ DRAG	UONFLY CASITA LLC			
	· · · · · · · · · · · · · · · · · · ·	Company as it now appears on our records limited Liability Company)	<u>}</u>	_
	anization for this Limited Liability Coumber 1.24000229498	mpany were filed on	<u>.</u> ar	nd assigned
This amendment is	submitted to amend the following:			
A. If amending na	me, enter the new name of the limite	ed liability company here:		
Enter new princips	distinguishable and contain the words "Limite all offices address, if applicable: dress MUST BE A STREET ADDRE	d Liability Company," the designation "LLC"	or the abbreviati	on "L.L.C."
Enter new mailing	address, if applicable:	4801 S. UNIVERSITY DR SUIT	TE 129	
(Mailing address M.	AY BE A POST OFFICE ROX)	DAVIE, FL 33328		
D. If amonding the			c tr	%
agent and/or the ne	registered agent and/or registered of wregistered office address here:	ffice address on our records, <u>enter th</u>	e name of the	4 H
Name of No	ew Registered Agent:			<u> </u>
New Regist	cred Office Address:	Enter Florida strees address	S	
		. Flori	₩ C	, i
		City Flori	Zip Co	ode

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

Title	Name	Address	Type of Action
 -			□Add
			□Remove
		·	⊡Change
			DAdd
			□ Remove
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D. If ames	nding any other information, enter change(s) bere: (Attach additional sheets, if necessary.)
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Effective da (II an effective o <u>Note:</u> If the document's e	ate, if other than the date of filing:
the record speci cord is filed.	ifics a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	05/28 . 2024
_	Signature of a member or authorized representative of a member
	orbitation of a transfer or structure and a transfer.
<u></u>	Typod or printed name of agnor

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