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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: HARVARD BUSINESS SERVICES, INC.

cecilia.silveira@dartmouthinternational.com

Account Number : 120080000045 Phone

: (382)645-7400

Fax Number

Email Address:

: (302)645-1280

Enter the email address for this business entity to be used for future

LLC AMND/RESTATE/CORRECT OR M/MG R	ESIGN
ORIGIN RAVILLO	

annual report mailings. Enter only one email address please.**

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T. LETTICX

AUG 2 8 2024

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ORIGIN BAY LLC	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 05/24/2024	and assigned
Florida document number L24000231371	
This amendment is submitted to amend the following:	.! .!
A. If amending name, enter the new name of the limited liability company here:	
Gaia Bay LLC	ä
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the	e appreviation "L.L.C."
Enter new principal offices address, if applicable:	4 30 2
(Principal office address MUST BE A STREET ADDRESS)	024
	i sin
	27
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u>~</u> ~
	5
R. If amonding the registered score and for many	
B. If amending the registered agent and/or registered office address on our records, enter the magent and/or the new registered office address here:	ame of the new registere
	•;
Name of New Registered Agent:	15
New Registered Office Address:	1 2,
Enter Fiorida street address	1
, Florida	:
City	Zip Code
Attenue Transition and Administration of the	

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 = M $AMBR = A$	anager uthorized Member		; ;
Title	<u>Name</u>	Address	Type of Action
			☐Add
			Remove
			□Aád
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			☐Remove
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. If amending any other informa	ation, enter change(s) here: (Attach additional sheets, if necessary,)	
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Effective date, if other than the	date of filing: (optional) st be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursua	
I an effective date is listed, the date mus Note: If the date inserted in this bl	a be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursus	ant to 605,0207
document's effective date on the D	ock does not meet the applicable statutory filing requirements, this date will no epartment of State's records.	of be listed as t
annound on all the midel and after all	and the state of t	
r record specines a delayed effectiv rd is filed.	e date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th	day after the
a 13 7694.	•	
August 25th	0004	
Dated August 26th		
	- Jan	
	Signature of a member or authorized representative or a member	
	ANTONIO CARLOS FAZIO JUNIOR	
	Typed or printed name of signee	

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