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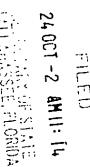
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: F55R, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Shanika Joseph Name of Person
Shanika Joseph Name of Person FSSR UC Firm-Company
1920 Ramsey Drive
Lake Worth, FL 33461 City/State and Zip Code Fromherart @ amail. com E-mail address: (to be used for turne annual report notification)
For further information concerning this matter, please call:
Shanika Joseph at 454, 669-2322 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25,00 Filing Fee \$\Bigsiz \$30,00 Filing Fee & \$\Bigsiz \$55,00 Filing Fee & \$\Bigsiz \$60,00 Filing Fee, \$\Bigsiz \$certificate of Status & \$\Bigsiz \$certified Copy tadditional copy is enclosed)\$\$ Certified Copy tadditional copy is enclosed)
Mailing Address: Registration Section Registration Section

Registration Section Division of Corporations P.O. Box 6327

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Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Lie (A Flo	ability Company as it now appears on our records.) orida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number 124000242	ity Company were filed on $\frac{May 28^{14} 2024}{239}$ and assigned
This amendment is submitted to amend the following	g:
A. If amending name, enter the new name of the	limited liability company here:
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LEC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET AL	ODRESS)
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX</u>	OCT -2 III III III III III III III III III
B. If amending the registered agent and/or registon agent and/or the new registered office address here.	ered office address on our records, <u>enter the name of the new registered</u> re:
Name of New Registered Agent:	Ulrick Lucien
New Registered Office Address:	920 Ramsey Drive Enter Florida street address
	Lake Worth Florida 33461 City Zip Code

New Registered Agent's Signature, if changing Registered Agent;

FSSR, LLC

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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR Ulric	Ulrick Lucien	1920 Ramsey Drive	ĎAdd
		1920 Ramsey Drive Lake Worth, FL 33461	□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
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(If an eff Note:	we date, if other than the date of filing:
ne recor ord is til	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated	
	Signature of a member or authorized representative of a member
	Shanika Joseph