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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ROSENSTEEL'S A/C ENTERPRISE LLC

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ARTICLES OF AMENDMENT *TO **OF**

ARTICLES OF ORGANIZATION $E_{\rm B} C$ <u>.</u> Rosensteel's A/C Enterprise 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 06/10/24 and assigned Florida document number L24000261891 This amendment is submitted to amend the following: 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 "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 1. ٠., Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

6/19/2024 07:18:49 PDT

To: 18506176383

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Fax: 8134365206

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	Address	Type of Action
MGR	Hagenbuch, Christopher	707 Belleair Road	ੴAdd
		Clearwater FL 33756	□Remove
			Change
			□Add
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If amending any other inform	mation, enter change(s) here: (Attach additional sheets, if necessary.)	
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Note: If the date inserted in this locument's effective date on the	the date of filing: (optional) must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 s block does not meet the applicable statutory filing requirements, this date will not be list Department of State's records. Citive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	ted as
Dated June 19	2024	
18 31 8 30	NW - Commence of the commence	
	Signature of a member or authorized representative of a member	
Nat Smith	The section of the se	
	Typed or printed name of signee	
· i.a.		