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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FASTKIT CORP

Account Number : 120100000009

Phone : (305)599-0839 Fax Number : (305)592-9591

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

Email Address:_

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K. SALY

JUN 2 6 2024

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
· 0//U ~
TALLAHASSEE FLORIO

RU	A IMPORT LLC	1/203/0
E. 100 The (Name of the Limited Lin	ability Company as it now appears or orida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Florida document number		21/2024 and assigned
This amendment is submitted to amend the following	ŗ	
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 design	nation "LLC" or the abbreviation "L. I. C."
.:: Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD		
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Enter new mailing address, if applicable: $n = \frac{n}{n} \sum_{i=1}^{n} \frac{1}{n} \sum_{i=1}^{n} \frac{1}{n} $		
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	
et in the second		
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B. If amending the registered agent and/or registe	red office address on our recor-	ds. enter the name of the new registers
agent and/or the new registered office address her	ē :	The same of the devi registere
Name of New Registered Agent:		
New Registered Office Address:	-	
New Registered Office Address:	Enter Florida st	rest addrace
	Emp. 1 W MM SI	to be a second of Casha
	City	, Florida
	City	Zip Code

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

:

٠:

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

	Title .	Name	Address	Type of Action
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(If an effect Note: If	e date, if other than the da ive date is listed, the date must be the date inserted in this block t's effective date on the Depa	e specific and cannot be pr c does not meet the app	rior to date of filing or m dicable statutory filing	ore than 90 days after fits	mar.) Pursuant to 604 020
If the record :	specifies a delayed effective de L	ate, but not an effective	e time, at 12:01 a.m. c	on the earlier of: (b)	The 90th day after the
record is filed		2024			
record is filed Dated	JUNE 25	• · · · · · · · · · · · · · · · ·			
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