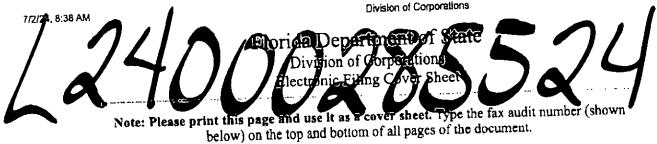
Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BUSINESS CHOICE, INC.

Account Number : 120010000004 ; (954)782-1829 Phone : (954)697-0245 Fax Number

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PLAYTOWN WESTON, LLC

Certificate of Status	0
Certified Copy	0
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K. SALY

<u> 반박 - 3 2024</u>

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED

AND LANGES FLORIDA PLAYTOWN WESTON ((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 062424 Florida document number <u>L24 00 0 28 55 24</u> 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." 153 WESTON RD Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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:

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

Name of New Registered Agent:

New Registered Office Address:

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

Enter Florida street address

, Florida ___

To: DIVISION OF CORPORATIONS

Page: 3 of 4

2024-07-02 12:47:24 GMT

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From: Francisco Pessoe

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		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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Dated July	2nd	member or solhoriz				<u>. </u>