Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : PEZLEGAL, LLC
Account Number : L20140000033 : (904)685-9321 Phone Fax Number : (904)567-1066

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

Email Address: <u>matthew@mhospitalityFL.com</u>

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AJEEN, LLC

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TO: Registration S Division of Co			
AJEEN, I	LC		
SUBJECT:	Name of Lim	nited Liability Company	····
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Eric A. Salama, Esq.		
	-	Name of Person	
	RezLegal, LLC		
		Firm/Company	
	816 A1A North, Suite 204		
		Address	
	Ponte Vedra Beach, Florid	la 32082	
		City/State and Zip Code	
	matthew@mhospitalityFL.c	com to be used for future annual report notif	ication)
For further information	concerning this matter, please c		
Eric A. Salama		904 638-1085	
Name of Person		at () Area Code Daytimo	: Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of 0 P.O. Box 63 Tallahassee.	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassec e Street, Suite 810

From: Erika Rivera

Fax: 19042970982

Docusign Envelope ID: F2ABDA8F-858C-4A7F-9DFE-A3196638979E

Fax. (850) 617-6383

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AJEEN, 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 July 1, 2024 and assigned Florida document number <u>L24000293158</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 "LLC." 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _. Florida __

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

From: Erika Rivera

From: Erika Rivera Fax: 19042970982 To: Fax: (850) 617-6383 Page: 5 of 6 09/17/2024 4:52 PM
Docusign Envelope ID: F2ABDA8F-858C-4A7F-9DFE-A3196638979E
T1 Amending Authorized rerson(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	David Medure	2107 Hendricks Ave.	□Add
		Jacksonville, FL 32207	■Remove
			□Change
MGR	Scott D. Alters	2107 Hendricks Ave.	■∧dd
		Jacksonville, FL 32207	□Remove
			□Change
			□Add
			☐Remove
			□ Add: €
			□Change
			Remove
			Change
			□Add
			□Remove
			Change

From: Erika Rivera

Fax: (850) 617-6383

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cord specifies a s filed.	delayed effective	e date, but not	an effective t	ime, at 12:01 a	a.m. on the earl	lier of: (b)	The 90th day aft	er the
ed	Sej	ptember 17	2024	·				
	Signed by:							
{	1 4							
Matt	hew Medur		nember or auth	orized represen	tative of a memb	ст		