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To:	بر Division of Commontions	iii.	2021
	Division of Corporations Fax Number : (850)617-6383		2024 OCT
From:	Account Name : EXPRESS CORPORATE FILING SERVICE INC.		2
	Account Number : I20000000146 Phone : (305)444-4994	g G	P
	Fax Number : (305)328-4774		2: 55
	the email address for this business entity to be used for nual report mailings. Enter only one email address please.		O1
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LION BOBCAT SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

M. SOLOMON

OCT 15 2024

From: Yanet Avila

Docusign Envelope ID: FC9241D5-B0A8-420B-9394-32FDD350FD95

## AKTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

LION BOBCAT SERVICES LLC		
(Name of the Limited Liability Company as it nov (A Florida Limited Liability Co	у appears ол our records.) прапу)	
The Articles of Organization for this Limited Liability Company were filed	d onand a	ssigned
Florida document number L24000307657		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability comp	pany here:	
The new name must be distinguishable and contain the words "Limited Liability Compan	y," the designation "LLC" or the abbreviation "	LLC."
Enter new principal offices address, if applicable:	70	<del>,</del>
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
	€: <del>-</del>	. ezez
Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·	Cardini.
(Mailing address MAY BE A POST OFFICE BOX)		<del>,</del> ;
<del></del>		<b></b>
	<u>⊬</u> ; ∪	
B. If amending the registered agent and/or registered office address or agent and/or the new registered office address here:	n our records, <u>enter the name of the n</u>	ew registere
Name of New Registered Agent:		
New Registered Office Address:		
E	nter Florida street address	
	, Florida	
City	Zip Cod	e

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 heing 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.

Docusign Envelope ID: FC9241D5-B0A6-420B-9394-32FDD350FD95
It amending Authorized recounts) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

To

<u>Title</u>	Name	Address	Type of Action
AMBR	VILMA CANALEJO	3192 SW 50TH ST	
		FORT LAUDERDALE, FL 33312	□ Remove
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From: Yanet Avila

Docusign Envelope ID: FC9241D5-B0A6-420B-9394-32FDD350FD95

● Page: 5 of 5

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