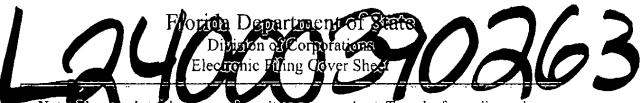
10/4/24, 1:05 PM

Page, 2 of 5

2024-10-04 17 10:04 GMT Division of Corporations 13053284774

From: Yanet Avila



Note: Pleas 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.

(((H24000336298 3)))



H240003352983ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

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

Email Address:

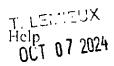
LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

REGAL FI LLC

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

Electronic Filing Menu

Corporate Filing Menu



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

2024-10-04 17:10:04 GMT

REGAL FI LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Comparing Horida document number L24000390263	any were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	iability company here:	
REGAL F&I LLC		
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or t	he abbreviation "L.L.C."
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)		
		:/a N
B. If amending the registered agent and/or registered office address here:	ce address on our records, enter the	name of the new registered
Name of New Registered Agent:		OF ST
New Registered Office Address:	Enter Chaid and D	<u> </u>
	Enter Florida street address	m 💆
	, Florida	
	City	Zip Code

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 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
			□Add
			C]Remove
			□Change
			□Add
			□Remove
			☐ Change
		· · · · · · · · · · · · · · · · · · ·	🗀 Add
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Effective date, if other than the date of filing: ((If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (Note: If the date inserted in this block does not need the applicable statutory filing requirements, this date will not be listed as a todocument's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:0? a.m. on the earlier of: (b) The 90th day after the cord is filed. Dated OCTOBER, 4TH 2024 January Signature of a member or authorized representative of a member		
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		Typed or printed name of signee