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Division of Corporations

Fax Number

: (850)617-6383

From:

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Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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K. SALY SEP 18 2024

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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				Zip Code
•	KEY	BISCAYNE City	, Florida	33149
:		Enter Florida	street address	
New Registered Office Address:		711 CRANDON B	LVD APT 402	•
Name of New Registered Agent:				· · · · · · · · · · · · · · · · · · ·
	* * *	•		
If amending the registered agent and/or regint and/or the new registered office address l	istered office a <u>bere</u> :	ddress on our reco	rds, <u>enter the num</u>	e of the new regist
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uiling address MAY BE A POST OFFICE BO	<u>0x)</u>	KEY BISCAYNE,	FL 33149	
er new mailing address, if applicable:		711 CRANDON B	LVD APT 402	
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incipal office address MUST BE A STREET.		KEY BISCAYNE,	FL 33149	•
er new principal offices address, if applicab	ole:	711 CRANDON B	LVD APT 402	
new name must be distinguishable and contain the won	ds "Limited Liabil	ity Company," the desig	mation "LLC" or th: at	previation "L.L.C."
If amending name, <u>enter the new name of t</u>	he limited liabi	llity company here	:	
s amendment is submitted to amend the follow	_			
rida document number L24000393374				
Articles of Organization for this Limited Liab	pility Company	were filed on	09/09/2024	and assigned
	Yelorida Limited I	Liability Company)		
(Maine or rue Primitéd	Liability Compa	ny as it now appears o Liability Company)	n our records.)	

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. Cr, 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

_ Change

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

	Authorized Member			
<u>Title</u>	· •	Name	Address	Type of Action
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			·,	□Remove
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