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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone

: (307)200-2803

Fax Number

: (813)436-5206

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

Email	Address:			



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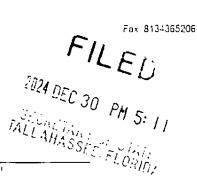
12/30/2024 97:31:18 PST

To: 18506176383

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If Changing Registered Agent, Signature of New Registered Agent

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SIX W ENTERPRISE 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 10/08/2024	and assigned
Florida document number L24000432526		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	llity company here:	
The new name must be distinguishable and contain the words "Limited Liab;	lity Company," the designation "LLC"	or the 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)		
		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:		
	Enter Florada street address	
	, Flo	rida
	•	Zip Code
New Registered Agent's Signature, it changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duties, and provided for in Chapter 605, F	II am familiar with and "S. Or, if this document is

12/30/2024 07 31 18 PST To 18506176393 Page: 3/4 Fax: 8134365206

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>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	WOODS, JEREMY	7901 4TH ST N STE 300	🖸 Add
		ST. PETERSBURG, FL 33702	□Remove
			Change
MGR	WOODS, MILDRED	7901 4TH ST N STE 300	
		ST, PETERSBURG, FL 33702	□Remove
			□Change
			□Add
			PHONE PH 5:
		·	□Change
			□Add
			□Remove
			©Remove
			Tit hange

12/30/2024-37 31-18 PST To: 13506176383 Page: 4/4 Fax: 8134365206

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ffective date, if other than the <i>c</i> (an effective date is listed, the date must fote: If the date inserted in this blocomment's effective date on the Dep	he specific and cannot be prior to date of filing or n ik does not meet the applicable statutory filir	(optional) more than 90 days after filing) Pursuant to 605,0207 (3)(ng requirements, this date will not be listed as the
record specifies a delayed effective Lis filed	date, but not an effective time, at 12:01 a.m.	on the earlier of: (b) The 90th day after the
December 30th	2024	
arca		
	gnature of a member or authorized representative	