Division of Corporations

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(((H24000387714 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NAJMY THOMPSON, P.L.

Account Number : I20090000014 Phone : (941)907-3999 : (941)896-4812 Fax Number

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

Email Address: BROBINSON@SOLECONSULTINGPARTNERS.COM

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110 9TH ST LLC

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Docusign Envelope ID: 78785885-EE57-408A-A878-A711DB991E23 CUVER LETTER (((H24000387714 3))) TO: Registration Section Division of Corporations 110 9TH ST LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Brian Robinson Name of Person S.V.I. Ventures, L.L.C. Firm/Company 11849 US Hwy 41 S Address Gibsonton, Florida 33534 City/State and Zip Code brobinson@soleconsultingpartners.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Brian Robinson 450-4991 Daytime Telephone Number Area Code Name of Person Enclosed is a check for the following amount:

Malling Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

■ \$25.00 Filing Fee

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Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

☐ \$60.00 Filing Fee,

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Docusign Envelope ID: 78785885-EE57-408A-A878-A711D8991E23 ARTICLES OF AMENDMENT

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(((H24000387714 3)))

(Name of the Limited Liability Company as it now (A Florida Limited Liability Com	appears on our records.)
(14,101.00 200.00 200.00 3	hero A)
The Articles of Organization for this Limited Liability Company were filed Florida document number L24000465586 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited Hability company.	
The new name must be distinguishable and contain the words "Limited Liability Company	
	S Hwy 41 S
(Principal office address MUST BE A STREET ADDRESS) Gibsonto	n, Florida 33534
Enter new mailing address, if applicable: 11849 U.	S Hwy 41 S
	n, Florida 33534
	ter Florida street address Florida Florida Fig. 100
City	Zip Code C

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

Docusign Envelope ID: 787B5885-EE57-408A-A878-A711DB891E23
II amenuing Authorized revision(s) suthbrized to manage, enter the title, name, and address of each person, being added or removed from our records:

(((H24000387714 3)))

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Shawn T. Kaleta	303 9th Street West Suite 2	□Add
		Bradenton, Florida 34205	■ Remove
			Change
MGR	XLM MANAGEMENT, L.L.C.	11849 US Hwy 41 S	
		Gibsonton, Florida 33534	□ Remove
			Change
			□ Remove
			Change
			□ Remove
			Change
			□Remove
			Change
			□Add
(((H24000	387714 3)))		□ <i>α</i>

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ective date, if other than the d reffective date is listed, the date must b	e specific and cannot be prior	r to date of filing or more	than 90 days after filing.) Pur	suant to 605.020
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cord specifies a delayed effective	date, but not an effective t	time, at 12:01 a.m. on	the earlier of: (b) The 90	th day after th
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N	2024			
November 15	,	·		
Docustigned by:				
and the second second	gnature of a member or auti	torized representative of	a member	··

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