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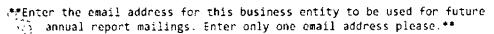
Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INC AUTHORITY, LLC

Account Number : I20240000004 Phone : (775)329-7721 Fax Number : (775)376-9207



Email	Address:	lylemarasigan@gmail.com
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From Corporate Service Center Inc 1.702.507.9682 Thu Nov 21 11:19:48 2024 MST Page 2 of 4

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2024 NOV 21 2
FALLAHAS SEE, FLORID.

Zip Code

		$r^{SEC_{RI}}$
A3 UNITED COI		ALLAHASCA
(Name of the Limited Liability Comps (A Florida Limited	gs as it now appears on our records.) Liability Company)	TALLAHASSEE, FLOR
The Articles of Organization for this Limited Liability Company Florida document number <u>L24000477820</u> .	were filed on 11/12/24	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	hity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	100 East Pine Street Ste #	110
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL 32801	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	_	nter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	***************************************	·····
	Enter Florida street address	
	Florid	.

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

From Corporate Service Center Inc 1.702.507.9682 Thu Nov 21 11:19:48 2024 MST Page 3 of 4

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>	Nume	Address	2024 HOV 21 PM 5: 07 SEURLIAN (EXTENSIO)	Type of Action
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	<u> </u>
Note:	tive date, if other than the date of filing: N/A (optional) flective 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 605,020? If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of e 90th day after the record is filed.
Dated	November 202024
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00