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To:

Division of Corporations

17278881294

Fax Number : (850)617-6383

From:

Account Name : FL PATEL LAW PLLC

Account Number : I20170000097 Phone : (727)279-5037 Fax Number : (727)888-1294

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

billabbott1@gmail.com Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **EAGLE95 LLC**

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Eagle95 LLC		
(Name of the Limited Liab (A Flori	ility Company as it now appears on our reco da Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liability	Company were filed on November 13, 2	and assigned
Florida document number 1.24000477922	 ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lie	mited Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	<u></u>	, I
B. If amending the registered agent and/or registere	ed affice address on our records, onto	r the name of the new registered
agent and/or the new registered office address here:		- the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	ess
-		Iorida
	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

Title	<u>Name</u>	Address	Type of Action
MBR	WY Protect LLC	15017 N Dale Mabry Hwy STE 1165	= Add
		Tampa, FL 33618	□Remove
			🖸 Add
			□Remove
			☐ Change
			□Add
			□Remove
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Tective date, if other than the da an effective date is listed, the date must be	te of filing:		(optic	onal)
an effective date is listed, the date must be ote: If the date inserted in this block	specific and cannot be pri	or to date of filing or licable statutory fi	more than 90 days after ling requirements, this	filing.) Pursuant to 605.0207 cdate will not be listed as
ocument's effective date on the Depar	rtment of State's record	is.	ing requirements, and	
record specifies a delayed effective da	ate, but not an effective	time, at 12:01 a.n	n, on the earlier of: (b) The 90th day after the
is filed.				
Documber 11	2024			
December 11		·		
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	vusuva	s Nanuu		
Śig	nature of a member or au	thorized representati	ve of a member	