## L24000483561

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## **COVER LETTER**

TO:

Registration Section

Divisio	n of Corp	porations				
		Limiteed Liability Company				
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed Ar	ticles of a	Amendment and fee(s) are sub	mitted for filing.			
riease return an	correspoi	ndence concerning this matter	to the following:			
			Name of Person			
		Olde Winter Park Law, LL	C			
			Firm/Company			
		401 West Colonial Drive #				
		401 West Colonial Dive	Address			
			Address			
		Orlando, Florida 32789				
		drobold1@gmail.com	City/State and Zip Code			
			to be used for future annual report no	otification)		
For further infor	mation ec	oncerning this matter, please ca	all:			
David Robold			321 300-5653			
	Name of	Person	at () Area Code Dayti	me Telephone Number		
Enclosed is a ch	eck for th	e following amount:				
■ \$25.00 Filin	ig Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
	g Address		Street Address:	ogtion		
Registration Section Division of Corporations			~	Registration Section Division of Corporations		
	Box 632		The Centre of			
ranan	iassee, r	TL 32314	Z413 IN. IVIONE	oe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Trump Life Limiteed Liability Company (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 November 15, 2024 and assigned. Florida document number L24000483567 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Trump Life L.L.C. The new name must be distinguishable and contain the words "Limited Liability 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered\_Agent: New Registered Office Address: Enter Florida street address \_\_\_, Florida \_

## 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

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>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
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		<u></u>	□Change
			□ Add
			□Remove
			Change

Note the original filing of	ontained a misspelling - "	Trump Life Limiteed Liab	oility Company".	
Limited was incorrectly	spelled as Limiteed.			
The new name will simp	ly be - "Trump Life L.L.C	• •		
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ective date, if other than effective date is listed, the dat	the date of filing:		(optional)	
<u>te:</u> If the date inserted in th	is block does not meet the	applicable statutory filing	ore than 90 days after filing.) g requirements, this date v	Pursuant to 605.02 will not be listed
ument's effective date on t	ne Department of State's re	ecords.		
cord specifies a delayed eff	activa data, but not an affa	ective time at 17:01 a.m.,	on the earlier of th). The	. Out day after th
s filed.	serve date, but not an erre	ctive time, at 12.07 a.m.	in the carrier of (b)	, your day arter to
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ed November 21	$\frac{2024}{}$	<del></del> ·		٦. ٣
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	Signature of a member			<del>-</del>

Filing Fee: \$25.00