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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone 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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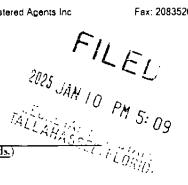
LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **BACK40 FINANCIAL LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

K. SALY

JAN 13 2025

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Back40 Financial LLC

(Name of the Limited Liability Company as it now appears on our records.

(A Fiorida Linn	red Elabinty Company)	~~ <i>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</i>
The Articles of Organization for this Limited Liability Comp. Florida document number L24000488885	any were filed on 11/19/24	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
The new name must be distinguishable and contain the words "Limited L	iability 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	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	,,,,,	
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ce address on our records, <u>enter t</u>	he name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		r ida Zip Code
	City	ир соце

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.

1/10/2025 12:48:26,PST

To: 18506176383

Page: 3/4

From: Registered Agents Inc.

Fax: 2083526281

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
AMBR	Tancora, Vincent	3118 Suncoast Plains Drive	🗹 Add
		Odessa, FL 33556	□Remove
			Change
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To: 18506176383

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ective date, if other than the effective date is fisted, the date mee: If the date inserted in this burnent's effective date on the I	slock does not meet the appli	cable statutory filing	(option or than 90 days after the grequirements, this	nal) iting.) Pursuant to 605.020 date will not be listed a
cord specifies a delayed effecti s filed.	ve date, but not an effective	time, at 12:01 a.m. c	on the carlier of: (b)	The 90th day after the
ed January 10	2025	*		
10 i 2	2025 (ハスイ) Sign/ture of a member or auti	_ 		
Robins be	<i>い人れ</i> /			