Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617 6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190

Phone : (844)449-3624 Fax Number : (512)597-0678

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

Email Address:\_\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN STELLWOOD LLC

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TO: Registration Se Division of Cor	ection rporations	<del>,</del>	
Stellwood	† LLC		
SUBJECT:		ided Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Diego Cruz		
		Name of Person	<del></del>
	ZenBusiness INC		
		Firm/Company	<del></del>
	336 E. College Ave Suite	301	
		Address	· · · · · ·
	Tallahassee, FL 32301		
	fulfillment@zenbusiness.co		
		to be used for future annual report notil	ication)
For further information of	oncorning this matter, please c	sll:	
e/o ZenBusiness INC		844 493-6249 at ( )	
Name o	f Person	at () Area Code Daytimo	: Telephone Number
Enclosed is a check for the	he following amount:		
■ S25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee. Certificate of Status & Certified Copy (additional coev is anclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

To:

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

Stellwood LLC				
( <u>Name of the Limited Liability Com</u> (A Florida Limited	pany as it now appears on our red Liability Company)	cor(ls.)		
The Articles of Organization for this Limited Liability Compar Florida document number 1.25000212569	y were filed on 2025-05-05	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	ibility company here:			
4743 Holdings LLC				
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation (	'LLC" or the abbrestation "L.L.C."		
Enter new principal offices address, if applicable:	4743 Lumberton Drive Or	lando, FL 32829		
(Principal office address MUST BE A STREET ADDRESS)				
		*****		
Enter new mailing address, if applicable:	4743 Lumberton Drive Or	lando, FL 32829 25		
(Mailing address MAY BE A POST OFFICE BOX)		(.5)		
		<u>.</u>		
		<u> </u>		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>er</u>	nter the name of themew registered		
Name of New Registered Agent:		<del></del>		
New Registered Office Address:				
	Enter Florida street address			
	Florida			
	Сиу	Zip Cone		
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>			
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	te performance of my dutie. Sprovided for in Chapter 6	s, and I am familiar with and 05, F.S. Or, if this document is		
If Ch	anging Registered Agent, Signat	ure 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

To:

<u>Title</u>	Name	Address	Type of Action
AMBR	Edwin Aponte	9320 Randal Park Boulevard Orlando, FL 32832	
			<b>≝</b> Remove
			□Change
			□Add
			□Remove
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			[][Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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ctive date, if other thar	the date of filing:		(optio	nst)
effective date is listed, the dat	e must be specific and cannot be price	r to date of filing or me	ore than 90 days after 1	iling.) Pursuant to 505.
et If the date inserted in the	is block does not meet the appli	cable statutory filing	requirements, this	date will not be liste
iment's effective date on t	he Department of State's record.	ς.		
ord specifies a delayed eff	ective date, but not an effective	time, at 12:01 a.in. o	in the earlier of: (b)	The 90th day after
liled.				
<sub>.4</sub> 8/5	2025			
A1				
/s/ Zachary Ilar	raza			
	Signature of a member or aut	anized representative	of a member	
	-	-		
Zachary Harraza				
		ted name of signee		