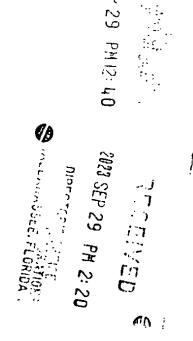
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(Reques	stor's Name)	
(Āddres	s)	-
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(City/St	ate/Zip/Phone #)	
PICK-UP	WAIT	MAIL
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(Docum	ent Number)	
ertified Copies	Certificates o	of Status
Special Instructions to Filing O	fficer:	
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Office Use Only



700416140937





Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com



ORDER FORM

TO Florida Department of State FROM:

Melissa Moreau

The Centre of Tallahassee

2415 North Monroe Street, Suite 810

Tallahassee, FL 32303

850.656.7953

corphelp@dos.myflorida.com

850-245-6051

PRIORITY Regular Approval

OUR REF # (Order ID#) 1182547

Page 1 of 1

ORDER ENTITY

FAMILY GENERATION MANAGEMENT, LLC

PLEASE PERFORM THE FOLLOWING SERVICES: FAMILY GENERATION MANAGEMENT, LLC (FL)

File the attached amendment and provide a certified copy.

NOTES: ____ \$55.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and

Friday, September 29, 2023

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

State: Family Generation Management,	'
Enter new principal office address, if applicable:	1300 Alton Road, Suite 6A
(<u>Principal office address</u> MUST BE A STREET ADDRESS)	Miami Beach, Florida 33139
Enter new mailing address, if applicable:	1300 Alton Road, Suite 6A
(<u>Mailing address</u> <u>MAY BE A POST OFFICE BOX</u>)	Miami Beach, Florida 33139
2. The Florida document number of this limited lia	
3. Jurisdiction of its organization: Delaware	
4. Date authorized to do business in Florida:	ily 31, 2023
SECTION II (5-9 complete only the applicable	changes)
New name of the limited liability company: (must)	st contain "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.	d for the purpose of transacting business in Florida and attach a maging members adopting the alternate name. The alternate name C." or "LLC.")
6. If amending the registered agent and/or register registered agent and/or the new registered office a	red officer address on our records, enter the name of the new
Name of New Registered Agent:	<u></u>
New Registered Office Address:	Enter Florida Street Address
	en
	, Florida City Zip Code
the provisions of all statutes relative to the proper and accept the obligations of my position as regist	nt and agree to act in this capacity. I further agree to comply wit r and complete performance of my duties, and I am familiar with tered agent as provided for in Chapter 605, F.S. Or, if this r in the registered office address, I hereby confirm that the limited
— If C	Changing Registered Agent, Signature of New Registered Agent

3

8. If the amendment c	hanges person, title or capacity in	accordance with 605,0902 (+)(e), indicate	that change:
Title/ Capacity	<u>Name</u>	Address	Type of A
		_ 	□R
			_
			□R
			□R
			□R
	icate, if required: no more than 90		DR
aforementioned am		y the official having custody of records in	i the

Filing Fee: \$25.00

Typed or printed name of signee