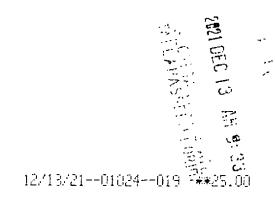
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COVER LETTER

TO:	Registration Se Division of Cor			•
(10 1 Ph 187 a		N INVESTMENTS LLC		-
SUBJEC	CT:	Name of Lim	ited Liability Company	
The encl	losed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		MARK E VAUGHAN CP	'A	
			Name of Person	
		CPA PARTNERS LLC		
			Firm/Company	
		8200 113TH ST STE 103		
			Address	
		SEMINOLE FL 33772		
			City/State and Zip Code	
		MARK@CPAPARTNERS	LLC.COM to be used for future annual report no	
For furth	ner information co	oncerning this matter, please of		attication)
		mater, prease of		W100
MARK E VAUGHAN		727 398-2080 1 at ()		
	Name of	Person	Area Code Dayti	me Telephone Number
Enclosed	d is a check for th	e following amount:		
■ \$25.	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration S		Street Address: Registration S	potion
	Registration Section Division of Corporations		Division of Co	
	P.O. Box 632		The Centre of	· ·

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LORENZEN INVESTMENTS LLC (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 $\frac{11-23-2021}{11-23-2021}$ and assigned Florida document number <u>L21000498883</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	KEN LU	1209 ORANGE STREET	
		WILMINGTON DE 19801	Remove
			Change
AMBR	River Capital Investment Group IIc	1209 ORANGE STREET	≘ Add
		WILMINGTON DE 19801	□Remove
			□Change
			Remove 3
			□ Remove
			GRIGO GRIG
			□Remove
			Change
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ecord specifies a delayed effective dis filed.	ate, but not an effective time, a	12:01 a.m. on the earlie	r of: (b) The 90th da	ry after the
	2021			
DECEMBER 2	··			
DECEMBER 2	·	²) /		