<u>LIL 0000 15785</u>

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Solution of Con			
SUBJECT:	Mul	berry Solutions, LLC	
		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
		Sonia Becerra	
		Name of Person	
		Swyft Filings, LLC	
	- , _ , _ , _ , _ , _ , _ , _ , _ , _ , 	Firm/Company	
	12	605 East Freeway, Suite 540	
	· · · · · · · · · · · · · · · · · · ·	Address	
		Houston, Texas 77015	
		City/State and Zip Code	
		filings@swyftfilings.com	
		to be used for future annual report notif	fication)
For further information of	concerning this matter, please c	all:	
Sonia E	Becerra	at (877) 777-04	50
Name o	of Person		e Telephone Number
Enclosed is a check for t	he 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 Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Mulberry Solutions, LLC			
(Name of the Limi	ted Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)		
The Articles of Organization for this Limited L	iability Company were filed on	01/22/2016	and assign	ned
Florida document number <u>L1600001578</u>				
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	of the limited liability company he	<u>re</u> :		
The new name must be distinguishable and contain the v	words "Limited Liability Company." the de	esignation "LLC" or the	abbreviation "L.L.C	
Enter new principal offices address, if applic	cable:			32TA
(Principal office address MUST BE A STREE	ET ADDRESS)		11 A	LACE ACE
•			- 2	AS TA
			7 =	SEE
Enter new mailing address, if applicable:			3	. ₩. . ₩.
(Mailing address MAY BE A POST OFFICE	BOX)			SZ.¥
			اب	<u> </u>
B. If amending the registered agent and registered agent and/or the new registered o		our records, <u>ente</u>	r the name of	the new
Name of New Registered Agent:	LegalCorp Solutions,	LLC		
New Registered Office Address:	3440 W Hollywood B	vd. Suite 415		
-	Enter Flor	ida street address		
	Hollywood	, Florida _	33021	
	City		7in Code	

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.

Travis (rabtree, UBO)
Legal (crp Solutions, LCC)
If Changing Registered Agent. Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added</u> <u>or removed from our records</u>:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			☐ Remove
		 	☐ Change
			Add
			□ Remove
			Change
			Add
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17. 65 °41.	us data if athan than the data of fillings	(and:	
(If an effe		(optional) rior to date of filing or more than 90 days after filing.) Pursuant to 605.0 blicable statutory filing requirements, this date will not be listed rds.	
	ord specifies a delayed effective date, but 90th day after the record is filed.	not an effective time, at 12:01 a.m. on the earlie	r of:
Dated _	March 24 2018		
		\wedge	
		1 1	

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Typed or printed name of signee

Filing Fee: \$25.00