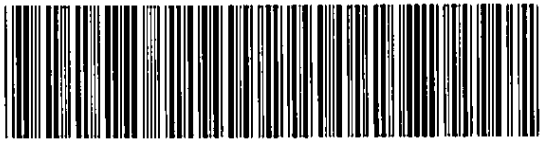


M190000009408



000379518520

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only

01/13/22--01001--001 *50.00

2022 JAN 12 PH 3:37

Handwritten signature

JAN 13 2022
ALBRITTON

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

25

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: 1/12 Glinda

- CERTIFIED COPY _____
- PHOTOCOPY _____
- CUS _____
- FILING AMENDMENT _____

1. WE-INNVENTURE LLC
(CORPORATE NAME AND DOCUMENT #) _____
2. _____
(CORPORATE NAME AND DOCUMENT #) _____
3. _____
(CORPORATE NAME AND DOCUMENT #) _____
4. _____
(CORPORATE NAME AND DOCUMENT #) _____
5. _____
(CORPORATE NAME AND DOCUMENT #) _____
6. _____
(CORPORATE NAME AND DOCUMENT #) _____

File 2nd

SPECIAL INSTRUCTIONS: _____

INNVENTURE LLC
5950 HAZELTINE NATIONAL DRIVE
SUITE 650
ORLANDO, FL 32822

FL Department of State:

INNVENTURE LLC, a Delaware Limited Liability Company confirms that it will not revoke its Withdrawal filing. Further, we release the use of the name INNVENTURE LLC.

Sincerely,

INNVENTURE LLC

s/ Neal Renuart

Neal Renuart

Authorized Representative

**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)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: WE-INNVENTURE, LLC

Enter new principal office 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)**

2. The Florida document number of this limited liability company is: M19000009408

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 10/01/2019

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: INNVENTURE LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C.," or "LLC.")

6. If amending the registered agent and/or registered officer 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

_____, Florida _____
City Zip 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.

If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Neal Renuart

Signature of the authorized representative

Neal Renuart

Typed or printed name of signee

Filing Fee: \$25.00

Delaware

Page 1

The First State

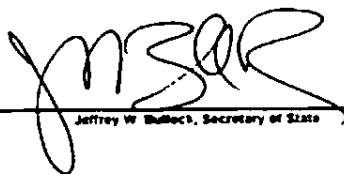
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "WE-INNVENTURE, LLC" FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "INNVENTURE LLC", ON THE TWELFTH DAY OF JUNE, A.D. 2020, AT 4:30 O`CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INNVENTURE LLC", IS THE LAST KNOWN TITLE OF RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INNVENTURE LLC" WAS FORMED ON THE NINTH DAY OF MARCH, A.D. 2017.




Jeffrey W. Bullock, Secretary of State

6342771 8321
SR# 20214262187

Authentication: 205122026
Date: 12-30-21

You may verify this certificate online at corp.delaware.gov/authver.shtml