

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

# M2200018359

**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.

((H23000171617 3)))



H230001716173ABC

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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : CAPITOL SERVICES, INC.  
Account Number : I20160000017  
Phone : (855)498-5500  
Fax Number : (800)432-3622

**\*\*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  
ASHFIELD SERVICES NORTH AMERICA LLC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 06      |
| Estimated Charge      | \$55.00 |

Electronic Filing Menu

Corporate Filing Menu

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MAY 09 2023  
K. Brumley

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

H23000171617

## 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: ASHFIELD SERVICES NORTH AMERICA 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: M22000018359

3. Jurisdiction of its organization: DELAWARE

4. Date authorized to do business in Florida: 12/08/2022

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

5. New name of the limited liability company: INIZIO SERVICES NORTH AMERICA 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: H23000171617

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

| <u>Title/ Capacity</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u>           |
|------------------------|-------------|----------------|---------------------------------|
| <hr/>                  | <hr/>       | <hr/>          | <input type="checkbox"/> Add    |
|                        |             | <hr/>          | <input type="checkbox"/> Remove |
| <hr/>                  | <hr/>       | <hr/>          | <input type="checkbox"/> Add    |
|                        |             | <hr/>          | <input type="checkbox"/> Remove |
| <hr/>                  | <hr/>       | <hr/>          | <input type="checkbox"/> Add    |
|                        |             | <hr/>          | <input type="checkbox"/> Remove |
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|                        |             | <hr/>          | <input type="checkbox"/> Remove |
| <hr/>                  | <hr/>       | <hr/>          | <input type="checkbox"/> Add    |
|                        |             | <hr/>          | <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.

Melissa Macarelli

Signature of the authorized representative

MELISSA MACARELLI

Typed or printed name of signee

Filing Fee: \$25.00

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# Delaware

The First State

Page 1

I, **JEFFREY W. BULLOCK**, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "ASHFIELD SERVICES NORTH AMERICA LLC", CHANGING ITS NAME FROM "ASHFIELD SERVICES NORTH AMERICA LLC" TO "INIZIO SERVICES NORTH AMERICA LLC", FILED IN THIS OFFICE ON THE TWENTY-SEVENTH DAY OF APRIL, A.D. 2023, AT 10:30 O'CLOCK A.M.



6703449 8100  
SR# 20231884639

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203298922  
Date: 05-08-23

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State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 10:30 AM 04/27/2023  
FILED 10:30 AM 04/27/2023  
BR 20231666002 - File Number 6783449

**CERTIFICATE OF AMENDMENT  
TO  
CERTIFICATE OF FORMATION  
OF  
ASHFIELD SERVICES NORTH AMERICA LLC**

1. The name of the limited liability company (hereinafter called the "limited liability company") is Ashfield Services North America LLC.

2. The certificate of formation of the limited liability company is hereby amended by deleting Article FIRST thereof in its entirety and by substituting in lieu of said Article the following new Article:

"FIRST. The name of the limited liability company is Inizio Services North America LLC (the "Company")."

*{Signature Page Follows}*

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**IN WITNESS WHEREOF**, the undersigned has executed this Certificate of Amendment  
on April 27, 2023.

DocuSigned by:  
  
Rob Henderson  
Financial Controller

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