K2C CCC 371465

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COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

Division of Cor	porations		•
	USINESS PUBLISHING LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Michael Jon Samuels		
		Name of Person	
	Singh, Singh & Trauben L	LP	
		Firm/Company	
	400 South Beverly Drive,	Suite 240	
		Address	
	Beverly Hills, CA 90212		
		City/State and Zip Code	
	msamuels@singhtraubenla		
	E-mail address: (to be used for future annual report not	ification)
For further information c	oncerning this matter, please co	all:	
Michael Jon Samuels		310 856-9705	
Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for the	-		
■ \$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		Street Address:	potion
Registration S Division of C		Registration Se Division of Co	
P.O. Box 632		The Centre of	

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SENSEI BUSINESS PUBLISHING LLC

(Name of the Limited	Liability Compa Florida Limited	ny a <u>s it now appears on our rec</u> Liability Company)	cords.)		
The Articles of Organization for this Limited Liability Company were filed on Florida document number L20000371468 This amendment is submitted to amend the following:		were filed on November 24	. 2020	and assigned	
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	<u>he limited liab</u>	ility company here:			
The new name must be distinguishable and contain the wor	ds "Limited Liabi	lity Company," the designation "l	LLC" or the abbrev	iation "L.I	,C.,
Enter new principal offices address, if applicable:		1000 Sanchez Osorio		ر د د	SE
(Principal office address MUST BE A STREET		Apartment 1730		-	22.5
	· -	Carolina, PR 00984			الماريخ ول - والما
				PH	<u> </u>
Enter new mailing address, if applicable:		P.O. Box 1730		<u> </u>	<u> 新元</u>
(Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>	Carolina, PR 00984		<u> </u>	10 H
B. If amending the registered agent and/or reg agent and/or the new registered office address		address on our records, <u>en</u>	ter the name of	the new	registered
Name of New Registered Agent:	Registered Age	ents Inc.			
New Registered Office Address:	7901 4th Street	, Suite 300			
	Enter Florida street address				
	St. Petersburg		Florida 33702		
			7	Lip Code	
New Registered Agent's Signature, if changing Re-	gistered Agent:				
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registed being filed to merely reflect a change in the regions of this of this of the company has been partitled in veriting of this of	and complete ered agent as p gistered office	performance of my duties provided for in Chapter 60 address. I hereby confirm	, and I am fami)5, F.S. Or, if th	liar with his docum	n and nent is

BUL Havre
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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
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Sective date, if other than the date of a effective date is listed, the date must be special to the date inserted in this block does cument's effective date on the Department.	ic and cannot be prior to not meet the application	o date of filing or more		g.) Pursuant to	
ecord specifies a delayed effective date, build is filed.	it not an effective tir	ne, at 12:01 a.m. on	the earlier of: (b) T	he 90th day a	after th
ted June 24	<u>2022</u>	_·			
	///				
					_

Filing Fee: \$25.00