

10/24/23, 10:48 AM

Division of Corporations

**L080000039429**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**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.**

(((H23000370598 3)))



H230003705983ABC4

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

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

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (954)208-0845  
Fax Number : (614)573-3996

**\*\*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  
DIGITAL TAP, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

Help

S. ROBERTS

OCT 25 2023

DocuSign Envelope ID: AD1293AC-7819-480A-B0B0-6BBA95048951

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

DIGITAL TAP, 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 04/18/2008 and assigned  
Florida document number L08000039429.

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 "L.L.C."

Enter new principal offices address, if applicable:

**(Principal office address MUST BE A STREET ADDRESS)**

155 N WACKER DR STE 4150,

CHICAGO, IL - 60606-1788

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:

C T Corporation System

New Registered Office Address:

1200 South Pine Island Road

*Enter Florida street address*

Plantation

*City*

, Florida 33324

*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.*

Denise Bell, Assistant Secretary

Denise Bell

**If Changing Registered Agent, Signature of New Registered Agent**

DocuSign Envelope ID: AD1293AC-7819-480A-80B0-6BBA95048951

**In 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Sandeep Patil	155 N WACKER DR, STE 4150, CHICAGO, IL 60606-178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
AMBR	Chris Rayasam	155 N WACKER DR, STE 4150, CHICAGO, IL 60606-178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
AMBR	Matthew Paul Cass	155 N WACKER DR, STE 4150, CHICAGO, IL 60606-178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
AMBR	Scott Gwilliam	155 N WACKER DR, STE 4150, CHICAGO, IL 60606-178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
AMBR	Erik Gernant	155 N WACKER DR, STE 4150, CHICAGO, IL 60606-178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
AMBR	Govindraj Mavanur Rangaswamy	155 N WACKER DR, STE 4150, CHICAGO, IL 60606-178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

[illegible]

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated October 5 2023

Matthew Cass

— 774B3282C68A97A —

Signature of a member or authorized representative of a member

Typed or printed name of signee

FI 055 - 12/16/2021 Wolters Kluwer Online

DocuSign Envelope ID: AD1293AC-7819-480A-B0B0-68BA95048951

**Additional AMBR of DIGITAL TAP, LLC**

**Business Address for all of the below : 155 N WACKER DR, STE 4150, CHICAGO, IL 60606-178**

Zina Schwartz

Mindy Shimanek

Chris Rayasam