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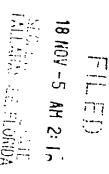
(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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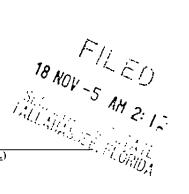
COVER LETTER

	istration Sect ision of Corpo			
SUBJECT:	Pinetree Tech	nology, LLC	÷	•
SUBJECT:		Name of Limit	led Liability Company	
The enclosed	l Anicles of A	mendment and fee(s) are subm	nitted for filing.	
Please return	all correspond	lence concerning this matter to	o the following:	
		Eric Nissan		
			Name of Person	
		Pinetree Technology, LLC		
			Firm/Company	
		750 Pinetree Road		
			Address	<u> </u>
		Winter Park, FL 32789		
			City/State and Zip Code	
		eric.nissan@gmail.com		
		E-mail address: (to	be used for future annual report notifica	tion)
For further in	nformation con	cerning this matter, please cal	II:	
Eric Nissan			at () 234-5447 Area Code Daytime To	
	Name of F	Person	Area Code Daytime To	elephone Number
Enclosed is a	check for the	following amount:		
■ \$25.00 F	iting 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



Pinetree Technology, 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 Co	ompany were filed on 5/22/20	and assigned	
Florida document number L13000074872	<u>_</u> ·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company here:		
nByte Studio, LLC			
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRI	<u> </u>		
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr Name of New Registered Agent:		r records, enter the name of the new	
New Registered Office Address:			
New Registered Office Address.	Enter Florida street address		
		Florida Zip Code	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered	Agent:		
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag being filed to merely reflect a change in the registered company has been notified in writing of this change.	emplete performance of my c ent as provided for in Chap	duties, and I am familiar with and eter 605, F.S. Or, if this document is	

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 Title Name Address Type of Action			
MGR = Manager AMBR = Authorized Member		18 NOV -5 AM)
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
			☐ Change
			Remove
			Change
			Add
			Remove
			Change
		 	□ Add
			□ Remove
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			Change
			
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Effective date, if other than the (If an effective date is listed, the date in	ne date of filing:	to date of filing or more than 90	(optional) days after filing.) Pursuan	nt to 605.0207 (3
Note: If the date inserted in this	block does not meet the applica	ible statutory filing requirer	nents, this date will not	be listed as th
document's effective date on the	Department of State's records.			
the record energifies a data-	ad affactive data. but ===	on officialist time -t	13,01 2	ondier et
the record specifies a delay The 90th day after the re		. an enective time, at	12:01 a.m. on the	earner or:
Dated October 31	2018	·		
	()			
	(Tin B)	_		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00