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Certified Copies	Certificates	of Status
Special Instructions to Fili	ng Officer:	

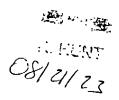
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COVER LETTER

	egistration Se ivision of Cor					•
CHRIECT		Franslation.com, LLC				
SUBJECT	:	Name of Lim	ited Liability Company			_
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please retur	rn all correspo	ondence concerning this matter	to the following:			
		Karen Borfgenheimer				
			Name of Person		· · · · · ·	
		InterpreterTransaltion.com	ı, LLC			
			Firm/Company			
		1228 West Avenue, Apt. 1	404			2023 AUG Z I
			Address	<u>-</u>		
		Miami Beach, FL 33139				_
			City/State and Zip C	ode		
		info@interpretertranslation				
			to be used for future and	ual report notifi	cation)	ć
For further	information c	oncerning this matter, please o	ail:			
Karen Bor	genheimer		305 at ()	490-9674		
	Name o	f Person	Area Code	Daytime	Telephone N	umber
Enclosed is	s a check for th	ne following amount:				
\$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing F Certified Copy (additional copy i	/	Ce Ce	0.00 Filing Fee, rtificate of Status & rtified Copy ditional copy is enclosed)
	ailing Addres			t Address: istration Sec	tion	
Registration Section Division of Corporations			sion of Corp			
Ρ.	O. Box 632	.7		Centre of Ta		. 010
13	allahassee, l	トレ 32314	241:	N. Monroe	Street, St	iite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

InterpreterTranslation.com, LLC		
(Name of the Limited Liability (A Florida	y Company as it now appears on our re Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability C Florida document number L14000089408	ompany were filed on June 4, 2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
Interpreter Translation, LLC		
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation	
Enter new principal offices address, if applicable:	n/a	2023
, .	ESS) n/a	
		3 2 T
Enter new mailing address, if applicable:	n/a	PHIZ
(Mailing address MAY BE A POST OFFICE BOX)		<u>÷</u>
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>er</u>	nter the name of the new registered
Name of New Registered Agent: n/a		
New Registered Office Address: n/a		
	rending name, enter the new name of the limited liability company here: er Translation, LLC ame must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." ew principal offices address, if applicable: al office address MUST BE A STREET ADDRESS) n/a n/a n/a n/a n/a n/a n/a n	ddress
n/a	_	, Florida
A. If amending name, enter the new name of the limited I Interpreter Translation, LLC The new name must be distinguishable and contain the words "Limited I. Enter new principal offices 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) 3. If amending the registered agent and/or registered office and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: n/a New Registered Office Address:		

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

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
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			□ Remove
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Filing Fee: \$25.00