

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

L14000161050

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((H23000285150 3)))



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To:

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

From:

Account Name : COMPUTERSHARE  
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**\*\*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  
INTERSTATE CAPITAL, LLC**

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TALLAHASSEE, FLORIDA

2023 AUG 17 AM 11:11

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

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AUG 19 2023  
K. Brumley

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INTERSTATE CAPITAL, 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 10/15/2014 and assigned  
Florida document number L14000161050.

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)**

1731 Germano Way

Pleasanton, CA 94566

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

1731 Germano Way

Pleasanton, CA 94566

**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:

Corporate Creations Network Inc.

New Registered Office Address:

801 US Highway 1

*Enter Florida street address*

North Palm Beach

*City*

Florida

33408

*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.*



Saray Djidji, Special Secretary

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

APPROVED  
AND  
FILED  
2023 AUG 17 AM 11:11  
STATE OF FLORIDA  
CLERK OF THE CIRCUIT COURT  
IN AND FOR THE COUNTY OF PALM BEACH

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**

[illegible]

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

[illegible]

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated August 17th 2023

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Signature of a member or authorized representative of a member

### Saray Djidji, Attorney in Fact

Typed or printed name of signee

**Filing Fee: \$25.00**