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(Business Entity Name)
(Document Number)
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DATE:

1/19/16

NAME:

ZIPDIGZ, LLC

TYPE OF FILING: AMENDMENT

COST:

30.00

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RETURN: PLAIN COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION:

ABBIE/PAUL HÓ

COVER LETTER

Division of Co				
CUDIEZT.		ZipDigz, LLC		
SUBJECT:	Name of Lin	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
		Bryan Brewer		
		Name of Person		
		Rentivity, LLC		
	*	Firm/Company		
	2	00 S. Orange Avenue, Suite 2875		基约 6
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		Orlando, FL 32801		1
	·	City/State and Zip Code	***************************************	(A)
		bbrewer@rentivity.com		三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三
For further information of	e-mail address: (to be used for future annual report notifical:	ention)	19 MH 11: 32
Bryan Brewer		321 202-2575		
Name o	of Person		Telephone Number	
Enclosed is a check for t	he following amount:			
□ \$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 \$1a Certified Copy (additional copy is or	ntus &
	ING ADDRESS:	STREET/COURIE	CR ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRES
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ZipDigs, LLC	
(Name of the Limited L.	iablitty Company as it now appears on our records.) forida Limited Liability Company)	
The Articles of Organization for this Limited Liabil Florida document number £15000045602	ity Company were filed on June 30, 2015	and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
	Remivity, LLC	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the abbi	reviation "L.L.C."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	(DDRESS)	
Enter new mailing address, if applicable:		10
(Mailing address MAY BE A POST OFFICE BO.	X)	
		夏 田 23
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>enter t</u> <u>address here</u> :	he name of the new
Name of New Registered Agent:		,
New Registered Office Address:		
	Enter Florida street address	
-	, Florida	
	Ciŋ·	` 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = N $AMBR = N$	lanager athorized Member		
<u>Title</u>	Name	Address	Type of Action
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Note: If	date, if other than the date of filing: (optional) ve 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, the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lister's effective date on the Department of State's records.	0207 (3)(b) d as the
f the recor b) The 90	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie Oth day after the record is filed.	r of:
Dated	January 19. 2016. Bryan Brewer	
	Signature of a recipier or authorized representative of a member	
	Bryan Brewer Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00