## L1500050820

| (                    | Requestor's Name)       |
|----------------------|-------------------------|
| (                    | Address)                |
|                      | Address)                |
| (                    | City/State/Zip/Phone #) |
| PICK-UP              | WAIT MAIL               |
| (                    | Business Entity Name)   |
|                      | Document Number)        |
| Certified Copies     | Certificates of Status  |
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## **COVER LETTER**

|             | Registration Sec<br>Division of Corp |   |  |                  |
|-------------|--------------------------------------|---|--|------------------|
| SUBJEC      |                                      |   |  |                  |
| SOBJEC      |                                      | Name of Lim   | ited Liability Company                     |                  |
| The enclo   | sed Articles of /                    | Amendment and fee(s) are sub  | mitted for filing.                         |                  |
| Please reti | um all correspor                     | ndence concerning this matter   | to the following:                          |                  |
|             |                                      | James Robert Wren, Jr.  |  |                  |
|             |                                      |   | Name of Person                             |                  |
|             |                                      | Vikand Corporate Holding  | s, LLC                                     |                  |
|             |                                      |   | Firm/Company                               |                  |
|             |                                      | 305 S Andrews Ave., Suite   | : 301                                      |                  |
|             |                                      |   | Address                                    |                  |
|             |                                      | Articles of Amendment and fee(s) are submitted for filing.  all correspondence concerning this matter to the following:    James Robert Wren, Jr. |  |                  |
|             |                                      |   | City/State and Zip Code                    |                  |
|             |                                      |   |  | <del></del>      |
|             |                                      | E-mail address: (   | to be used for future annual report notifi | cation)          |
| For furthe  | r information co                     | oncerning this matter, please ca  | all:                                       |                  |
| James Ro    | bert Wren, Jr.                       |   |  |                  |
|             | Name of                              | Person  | Area Code Daytime                          | Telephone Number |
| Enclosed    | is a check for th                    | e following amount:   |  |                  |
| □ \$25.0    | 0 Filing Fee                         | _   |  |                  |

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

| Vikand Corporate Holdings, LLC   |  |                             |
|--|--|-----------------------------|
| ( <u>Name of the Limited Liabili</u><br>(A Florid  | ity Company as it now appears on our records.)<br>a Limited Liability Company) |                             |
| The Articles of Organization for this Limited Liability C  | Company were filed on March 23, 2015   | and assigned                |
| Horida document number L15000050820  | ·  |                             |
| his amendment is submitted to amend the following:   |  |                             |
| A. If amending name, enter the new name of the lim   | ited liability company here:   |                             |
| Vikand Solutions, LLC  |  |                             |
| he new name must be distinguishable and contain the words "Lin   | nited Liability Company," the designation "LLC" or                             | r the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable:  |  |                             |
| Principal office address MUST BE A STREET ADDI   | RESS)  |                             |
|  |  | 2011                        |
|  |  |                             |
| Inter new mailing address, if applicable:  |  | 552: — <del></del>          |
| Mailing address MAY BE A POST OFFICE BOX)  |  |                             |
| and the second s |  |                             |
|  |  | <del></del>                 |
| 3. If amending the registered agent and/or registered agent and/or the new registered office add   | stered office address on our records, <u>s</u><br>l <u>ress here</u> :         |                             |
|  |  |                             |
| Name of New Registered Agent:  |  |                             |
| New Registered Office Address:   |  |                             |
|  | Enter Florida street address   |                             |
|  | , Floric   |                             |
|  | City   | 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, enter the title, name, and address of each person\_being added or removed from our records:

| <u>Title</u> | <u>Name</u> | Address     | Type of Action |
|--------------|-------------|-------------|----------------|
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|              |             |             | Remove         |
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| <b>Note:</b> If the date inserted in the             | the date of filing:  e must be specific and cannot be prior to date as block does not meet the applicable st the Department of State's records. | (option of filing or more than 90 days after catutory filing requirements, this | onal)<br>filing.) Pursuant to 605.0<br>date will not be listed | )207<br>f as |
| ne record specifies a dela<br>The 90th day after the | ayed effective date, but not an or record is filed.   | effective time, at 12:01 a  | .m. on the earlier   | r of         |
| June 12<br>Dated                                     | 2017  |   |  |              |
|  |   |   | <b>2011</b><br>- ALL:  | <b></b>      |
| $\sim$ $\sim$ $\sim$                                 |   |   | 3 · 2: .   | _            |
| Jan 70   | Signifure of a member or authorized r   | representative of a member  | <del></del>  | 62           |
| James Robert Wrer                                    | V   | representative of a member  | UN 15 PM   |              |

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Filing Fee: \$25.00