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COVER LETTER

Div	ision of Cor	porations				
SUBJECT:	Empire Group Sthlmia LLC					
SUBJECT.		Name of Lim	ited Liability Company			
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.			
		ndence concerning this matter	_			
		Mikael Lundell				
		· · · · · · · · · · · · · · · · · · ·	Name of Person	<u> </u>		
		Converdiant USA LLC				
	Firm/Company					
	350 Lincoln Road, FL 33139					
			Address			
		1 1 1070	City/State and Zip Code			
	lundell77@icloud.com E-mail address: (to be used for future annual report notification)					
For further in	nformation co	oncerning this matter, please ca	ail:			
Mikael Lund	iell		786 332-8535			
	Name of	f Person	Area Code Daytimo	: Telephone Number		
Enclosed is a	check for th	e following amount:				
■ \$25.00 F	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 Status & Certified Copy (additional copy is enclosed)		

TO:

Registration Section

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

Empire Group Sthlmia LLC						
(Name of the Limited Liability Comps (A Florida Limited	ny as it now appears on our records.) Liability Company)					
The Articles of Organization for this Limited Liability Company Florida document number	were filed on August 20, 2015 and assigned					
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liab	ility company here:					
Converdiant USA LLC						
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."					
Enter new principal offices address, if applicable:	Wework:					
(Principal office address MUST BE A STREET ADDRESS)	Converdiant USA LLC					
	350 Lincoln Road, FL 33139					
Enter new mailing address, if applicable:	Wework					
(Mailing address MAY BE A POST OFFICE BOX)	Converdiant USA LLC					
	350 Lincoln Road, FL 33139					
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here same of New Registered Agent: New Registered Office Address:	Enter Florida street address					
	City Florida Zip Code					
New Registered Agent's Signature, if changing Registered Agent:	ONS -					

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					
·····			□ Add					
			□ Remove					
			☐ Change					
			□ Add					
			□ Remove					
			☐ Change					
			□ Add					
			□ Remove					
			Change T					
			GRemtive C					
			Change OKEMOVE OKEM					
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			□ Remove					
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_	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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(If an eff	ve date, if other than the date of filing:	nt to 605.02 be listed	207 (3)(as the
the red) The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	e earlier	of:
Dated			
	Mikel Lundel		
	Signature of a member or authorized representative of a member		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00