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| (Requestor's Name) | | | |
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| (Vedaesions Maille) | | | |
| (Address) | | | |
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| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| | | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer. | | | |
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Office Use Only



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COVER LETTER

| то: | Registration Se Division of Cor | | | | |
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| | | DOMAINSTE | ER, LLC | | |
| SUBJE | ECT: | Name of Lim | ited Liability Company | | |
| The en- | closed Articles of | Amendment and fec(s) are sub | mitted for filing. | | |
| Please | return all correspo | ondence concerning this matter | to the following: | | |
| | | | MICHAEL GLEISS | NER | |
| | | | Name of Person | | |
| | | | DOMAINSTER, | LLC | |
| | | | Firm/Company | | |
| 4 TAYLOR STREET | | | | | |
| | | | Address | | |
| | | M | ILLBURN NJ 0704 | 1 | |
| | | | City/State and Zip Code | c | |
| mg@michaelgleissner.com | | | | | |
| | | E-mail address: (| to be used for future annua | d report notification) | |
| For fur | ther information c | oncerning this matter, please c | all: | | |
| | MICHAEL | GLEISSNER | 212 at () | 796-4304 | |
| | Name o | f Person | Aren Code | Daytime Telephone Number | |
| Enclos | ed is a check for th | ne following amount: | | | |
| ≡ \$2 | 5.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee Certified Copy radditional copy is er | Certificate of St | atus & |
| | | | | | |
| Mailing Address: Registration Section Division of Corporations | | | Address: ration Section | | |
| | | | on of Corporations | | |
| | P.O. Box 632 | | | entre of Tallahassee | |
| | Tallahassee, i | FL 32314 | | N. Monroe Street, Suite 810 assee, FL 32303 | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DOMAINSTER, LLC

2023 GCT 12 AH 7: 09

(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 February 10, 2016 and assigned on Florida document number L1600028899

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 "LLC."

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)

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:

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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.

EUGENE D. MONDRUS

160 SW 7TH CT

POMPANO BEACH

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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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Page 2 of 3

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| D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) | |
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| E. Effective date, if other than the date of filing: | ant to 605,0207 (3)(b) of be listed as the |
| If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the (b) The 90th day after the record is filed. | ie earlier of: |
| Dated August 16 . 2023 | |
| Signature of a method of authorized representative of a method | |
| MICHAEL GLEISSNER Typed or printed name of signee | |