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## **COVER LETTER**

TO:	Registrati Division o	n Section Corporations	
CHRI	ECT:	GENERAL BYTES USA, LLC	
3000	nc. t	Name of Limited Liability Company	
		s of Amendment and fee(s) are submitted for filing.	
Please	: return all cor	espondence concerning this matter to the following:	
		Karal Kyousky Name of Person	
		GENERAL BYTEJ USA LLC Firm/Company	
		3657 Cortez Rd W, Unit 100	
		Bradenton, FL 34210	
		Bradenton, FL 34210  City/State and Zip Code  MISKA-damm (Whotmail.com	
For fu	ether informat	E-mail address: (to be used for future annual report notification) on concerning this matter, please call:	
		yousky at (94/) 726 1808  Ve of Person V Area Code Daytime Telephone Number	
	N'	ve of Person Area Code Daytime Telephone Number	
Enclos	sed is a check	or the following amount:	
	25.00 Filing F	<del>-</del>	
	N:	AILING ADDRESS: STREET/COURIER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## GENERAL BYTES USA LLC

(Name of the Limited Liability Company as it now appears on our records.)

	Limited Clabinty Company)	24 2 2 4 4
The Articles of Organization for this Limited Liability C	ompany were tiled on $\underline{\it U5}$	- 37- 2016 and assigned
Florida document number L 16 000 /05588	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the design	ation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		50.50
(Principal office address MUST BE A STREET ADDR	RESS)	<u> </u>
		□ <u>■</u> □
Enter new mailing address, if applicable:		<del></del>
(Mailing address MAY BE A POST OFFICE BOX)		8
B. If amending the registered agent and/or regis		r records, <u>enter the name of the new</u>
registered agent and/or the new registered office add	ress here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida se	reet address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registere	d Agent:	
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and c accept the obligations of my position as registered a being filed to merely reflect a change in the registere company has been notified in writing of this change.	omplete performance of my o gent as provided for in Chap ed office address, I hereby co	duties, and I am familiar with and eter 605, F.S. Or, if this document is
	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 = M $AMBR = M$	Manager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AR	MICHAELA DAMM	3657 Cortez Rd W # 100 Bradenton, FL 74210	🗆 Add
		Tradenton, FL 74210	<b>∕⊠</b> ,Remove
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	we date, if other than the date of filing: $05-20-/9$ (optional)
m effe	ve date, if other than the date of filing: 05-20-/9 (optional) ctive 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
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Filing Fee: \$25.00