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CT CORP

(850)656-4724 3458 Lakeshore Drive, Tallahassee, FL 32312

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| Name: | NROLL TECH LLC | |
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Thank you!

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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nRoll Tech LLC

company has been notified in writing of this change.

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| (Name of the Limited Liab (A Flor | pility Company a rida Limited Liabi | s it now appea lity Company) | rs on our re | CordsDiuniii. TALLAHAS | KY OF STATE |
|---|--|---------------------------------|-------------------------|--------------------------------|--|
| The Articles of Organization for this Limited Liability Florida document number L16000117112 | Company wei | | | | |
| This amendment is submitted to amend the following: | : | | | | |
| A. If amending name, enter the new name of the li | mited liability | company h | ere: | | |
| N Technology, LLC | | | | | |
| The new name must be distinguishable and contain the words "L | limited Liability (| Company," the o | lesignation " | LLC" or the abbre | eviation "L.L.C." |
| Enter new principal offices address, if applicable: | | | | | |
| (Principal office address MUST BE A STREET ADI | DRESS) | | | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | - - - | | | | |
| B. If amending the registered agent and/or register agent and/or the new registered office address here | | ress on our i | ecords, <u>er</u> | iter the name (| of the new register |
| Name of New Registered Agent: | | | | | |
| New Registered Office Address: | | | | | |
| | | Enter Flo | rida street ad | ldress | |
| | | | | , Florida | Zip Code |
| | | Cıty | | | Zip Code |
| New Registered Agent's Signature, if changing Registe | ered Agent: | | | | |
| I hereby accept the appointment as registered ages provisions of all statutes relative to the proper and | nt and agree t Lcomplete per | o act in this formance of | capacity. Imy dutie. | I further agrees, and I am fac | e to comply with th niliar 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

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> | Name | Address | Type of Action |
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| ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be pri te: If the date inserted in this block does not meet the appl | licable statutory filin | (opti ore than 90 days afte g requirements, thi | r filing.) Pu | irsuant to | 605.02 listed |
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