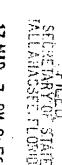
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## **COVER LETTER**

TO:	Registration Se Division of Cor					
CUBIE	Chennault					
SUBJEC		Name of Limited Liability Company				
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	eturn all correspo	ondence concerning this matter	to the following:			
		Douglas O'Keefe				
			Name of Person	<del></del>		
			Firm/Company	<del></del>		
		3975 Leafy Way				
			Address		- 3'C	
		Miami, FL 33133			77 MAR -7 PH 3: 56	
			City/State and Zip Code		<b>70</b> 5	
		dokeefe@dokeefelaw.com				
			to be used for future annual report notific	ation)		
For furth	ner information of	oncerning this matter, please ca	all:		က် ကိ	
Douglas	L. O'Keefe		305 213-9029 at ()		(5°)	
	Name o	f Person	Area Code Daytime 1	Felephone Number		
Enclosed	d is a check for t	he following amount:				
\$25.	00 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)	ı	
	Registi Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURIE Registration Section Division of Corporat Clifton Building			

Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Chennault Innovation Partners, LLC					
( <u>Name of the Limited Liab</u> (A Flori	lity Company as it now appears on our records.  da Limited Liability Company)	)			
The Articles of Organization for this Limited Liability	Company were filed on 2/13/2017	and assigned			
Florida document number L17000034397	·				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lin	nited liability company here:				
Chennai Innovation Partners, LLC					
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:		1 产			
(Principal office address MUST BE A STREET ADD	RESS)	<b>3</b> 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3			
		1			
Enter new mailing address, if applicable:		PH 3: 56			
• • • •					
(Mailing address MAY BE A POST OFFICE BOX)		<del></del>			
	<del> </del>	<u></u>			
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		enter the name of the new			
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address	Enter Florida street address			
	, Flor				
	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:

MGR = Manager AMBR = Authorized Member						
<u>Title</u>	Name	Address	Type of Action			
			Add			
			□ Remove			
			☐ Change			
			□ Add			
			☐ Remove			
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			☐ Change ☐ Add ☐ Remove ☐ Change			
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ffective date, if other is distributed in the date in second comment's effective	ed, the date must be so rted in this block of	e of filing: _ specific and can does not meet	not be prior to the applicab	date of filing o	r more than 90 ling requirem	(optional) days after filing ents, this date	.) Pursuant to 605	5.0207 ed as
e record specifie The 90th day af			e, but not	an effectiv	e time, at :	l2:01 a.m.	on the earli	er of
ated March 6	<u>-</u>	$\frac{2}{\sqrt{2}}$	017	n.				
		1 / 4	ー・レンノ					
	SAgn	ature of a mem	ber or author	zed representa	ive of a member	er		

Page 3 of 3

Filing Fee: \$25.00