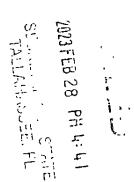
L17000064678

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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COVER LETTER

	ision of Cor				
SUBJECT:	IPPay, LLC	4			
SUBJECT:					
The enclosed	d Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return	ı all correspo	ndence concerning this matter	to the following:		
		Craig I. Kelley			
			Name of Person		_
		Kelley Fulton Kaplan & E	iller, P.L.		
			Firm/Company		- ~>
1665 Palm Beach Lakes Blvd., Suite 1000				2023FEB SLICHTALLA	
			Address		_ <u>Pi</u>
		West Palm Beach, FL 334	01		28 1
			City/State and Zip Code		PH FI
		craig@kelleylawoffice.com			
For further is	nformation c	E-mail address: (oncerning this matter, please c	to be used for future annual report n	otification)	F
Craig I. Kell		the initial state of the state	561 491-1200		
	Name of	Person	at ()	time Telephone Numbe	er
	vaine of	11 (137)	Med Civile 1743	and reseption ratios	
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)	Certifie	ate of Status &
	iling Address		<u>Street Address:</u> Registration S		
Registration Section Division of Corporations			Division of C		
P.C	D. Box 632	7	The Centre of		0.1.0
Tal	lahassee, F	L 32314	2415 N. Mon	roe Street, Suite	810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IPPay, LLC		
(Name of the Lim	ited Liability Company as it now app (A Florida Limited Liability Company	ears on our records.)
The Articles of Organization for this Limited I		3-21-2017 and assigned
lorida document number L17000064678	·	
his amendment is submitted to amend the fol	lowing:	
a. If amending name, enter the new name	of the limited liability company	<u>here</u> :
he new name must be distinguishable and contain the	words "Limited Liability Company," th	e designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if appli	cable:	
Principal office address MUST BE <u>A STRE</u>	ET ADDRESS)	v. 26
		77 23 27 m
		22 7
nter new mailing address, if applicable:		28
Mailing address MAY BE A POST OFFICE		-D 11:
numg unaress may be A POST OF FEE		PH F
		一
. If amending the registered agent and/or	registered office address on our	records, enter the name of the new register
gent and/or the new registered office addre		
Name of New Registered Agent:	Craig 1. Kelley	
New Registered Office Address:	1665 Palm Beach Lakes Blvd.,	Suite 1000
New Integrating Office Address.	Enter F	lorida street address
	West Palm Beach	Florida <u>33401</u>
	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>	<u>Name</u>	Address	Type of Action
CFO	James LeGates	2001 Broadway, 6th Floor	□Add
		Riviera Beach, FL 33404	Remove
			□ Change
MGR	Convergence Technologies, Inc.	2001 Broadway, 6th Floor	= Add
		Riviera Beach, FL 33404	□Remove
			Change 20233dd CHAdd CHAD CHAD
			□Remove
	<u> </u>		
			□Remove
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			Clause

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Filing Fee: \$25.00