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(Ro	equestor's Name)	
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COVER LETTER

TO:		tration Sect on of Corpo				
SUBJEC		ITS LLC				
			Name of Lin	nited Liability Company		
The encl	losed A	articles of A	mendment and fee(s) are sub	omitted for filing.		
Please re	cturn al	l correspond	lence concerning this matter	to the following:		
			Muhammad Omais			
				Name of Person		
			RITS LLC			
				Firm/Company	TALLAHASSEE	TIL
			425 S Pinellas Ave		AHAS.	FILE.
				Address	SCC	
			Tarpon Springs, FL, 34689)	FLOG	D b. w
			ritsllc.web@gmail.com	City/State and Zip Code	700	د
			E-mail address: (to be used for future annual report not	ification)	
For furth	er info	rmation con	cerning this matter, please c	all:		
Muhami	nad Or	nais		727 9453712 at ()		
		Name of P	erson		ne Telephone Number	
Enclosed	lisact	neck for the	following amount:			
\$25.0	00 Fili	ng Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Sta Certified Copy (additional copy is en	tus &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	RITS LLC
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on our records.) ida Limited Liability Company)
The Articles of Organization for this Limited Liability	
Florida document numberL17000098978	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	mited liability company here:
	22
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" of the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADE	
Enter new mailing address, if applicable:	CORRECT OF
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	istered office address on our records, <u>enter the name of the nodress here</u> :
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zin 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
			Remove
			Change
			Add
		-	Remove
			Change Add
			Add Add Remove
			Grange
			Remove
			Change
			Add
			□ Remove
			Change
			□ Remove
			Change

We have expanded our	business into the field o	f IT Consultancy as we	1.		
The new IT section of	the company now offer f	ollowing services	-		
Software, Web & Mob	ile App Design and Deve	elopment Services.			
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ective date, if other than reffective date is listed, the date is listed in a	te must be specific and cann	ot be prior to date of filing a	or more than 90 days at	tional) ter filing.) Pursuan	t to 605.020
te: If the date inserted in the cument's effective date on the contract of the	ms diock does not meet t	ine applicable statutory f	ling requirements, t	his date will not	be listed a
record specifies a del he 90th day after the	ayed effective date,	, but not an effectiv	e time, at 12:01	a.m. on the	earlier
John day area ene	record is filed.				
ed					
MALL					
		er or authorized representat			

Page 3 of 3

Filing Fee: \$25.00