

L17000127973

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

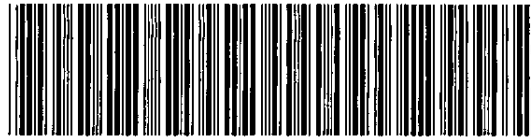
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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17 JUL 12 AM 8:28

DIVISION OF CORPORATIONS

2017 JUL 12 PM 1:04

STATE
TALL, VERMONT, CANADA

O SIMMONS

JUL 13 2017

Sundate Research

Requester's Name

Address

City/State/Zip

Phone #

656-5454

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CORPORATION NAME(S) & DOCUMENT NUMBER(S). (If known):

1. TrialDx LLC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in

☐ Pick up time

☐ Certified Copy

☐ Mail out

☐ Will wait

☒ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☒ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☒ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
TRIALDX, LLC
A Florida Limited Liability Company**

The Articles of Organization for this Limited Liability Company were electronically filed on June 12, 2017 and assigned Florida document number L17000127973.

This amendment is submitted to amend the following [check all that apply]:



Amending name. The new name of this Limited Liability Company is:

CONFLUENCESTAT, LLC

(which name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C.")



Amending registered agent and/or registered office address:

Name of New Registered Agent: _____
(must sign below)

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 608, Florida Statutes.

Signature of New Registered Agent

New Registered Office Address:

(Enter Florida street address)

_____, Florida _____
(City) (Zip Code)

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☐ Amending the Managers or Managing Members of record:

MGR = Manager (if manager managed)

MGRM = Managing Member (if member managed)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Change <input type="checkbox"/> Remove

☐ Amending Other Information:

Effective date if different than the date of filing: _____
(Cannot be prior to date of filing or, if delayed, more than 90 days after amendment file date)

Dated: June 26, 2017

By: Jason T. Connor
Jason Connor, Manager

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