Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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H190002090613ABC

To:		
	Division of Corporations	1 - 1
	Fax Number : (850)617-6383	- · - · ·
from:		
110111.	Account Name : HARVARD BUSINESS SERVICES, INC.	
	Account Number : 120080000045	· :
	Phone : (302)645-7400	
	Fax Number : (302)645-1280	-: - : -:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ULTICORP LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$30.00

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ULTICORP LLC					
(Name of the Limited Liability Compa (A Florida Limited I	ny as if now appears on our records.) Liability Company)		-		
The Articles of Organization for this Limited Liability Company Florida document number L17000146500	were filed on 07/07/2017	and :	assigne	d	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company here:				
			20		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abb	reviation	"ISEC.		
Enter new principal offices address, if applicable:	8, EVROPIS STR., 2064 STROVOLOS	• ,	;== 	Benez	
(Principal office address MUST BE A STREET ADDRESS)	NICOSIA, CYPRUS		9		
		<u> </u>	<u>-ō</u>	<u></u>	
					
Enter new mailing address, if applicable:	8, EVROPIS STR., 2064 STROVOLOS				
(Mailing address MAY BE A POST OFFICE BOX)	NICOSIA, CYPRUS	<i>,</i>			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent:					
New Registered Office Address:					
New Registered Office Address.	Emer Florida street address				
	, Florida				
	Ciņ	Zip Co	de		
New Registered Agent's Signature, if changing Registered Agent:					
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am fa provided for in Chapter 605, F.S. Or, i	miliar I this de	with an ocumer	rd	
Īſ Cha	nging Registered Agent, <u>Signature of New Reg</u>	istered A	gent	-	

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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
AMBR	DIMITRIOS FOTOPOULOS	12 KYKKOU STR 2062 STROVOLOS	
		NICOSIA CY	
			■ Remove
			Change
AMBR	DIMITRIOS FOTOPOULOS	8, EVROPIS STR., 2064 STROVOLOS	
		NICOSIA, CYPRUS	□ Remove
			2 0
			O Glange
			Remove
			☐ Change
			D Add
			Remove
			Change
	w		Add
			Remove
			Change
			□ Add
			☐ Remove
			☐ Change

Effective date, if other than the date of filing: (Optional) If an effective date, if other than the date of filing: (In effective date is listed, the date must be specific and cannot be prior to date of filing or ower than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filling requirements, this date will not be listed as the document's effective date on the Department of State's records. The 90th day after the record is filed. Dated July 9th 2019 Signature of a number occauthorized representative of a member			<u> </u>			
Effective date, if other than the date of filing: [If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. The effective date and the date will not be listed as the document's effective date on the Department of State's records. Dated July 9th 2019						
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				effective time, at 1	2:01 a.m. on the	e earlier of:
•	Dated July	9th	2019			
Signature of a member organithorized representative of a member			-311			
		Signatu	re of a member ocauthorized	representative of a member	r	

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Filing Fee: \$25.00

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