L18000047727

| (Req | uestor's Name) | |
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| PICK-UP | WAIT | MAIL |
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| Certified Copies | Certificates | s of Status |
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| Special Instructions to F | iling Officer: | |
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Office Use Only



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3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

12/14/2018

| D | Acc#120160000072 |
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| | Acc#I20160000072 |
| Name: | AXIOM ACQUISITION VENTURES, LLC |
| Document #: | |
| Order #: | 11332064 |
| Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: | |
| Apostille/Notarial Certification: | Country of Destination: Number of Certs: |
| Filing: 🗸 | Certified: Plain: ✓ COGS: |
| Availability Document Examiner Updater Verifier W.P. Verifier Ref# | Amount: \$ 25.00 |

Thank you!

COVER LETTER

TO: Registration Section **Division of Corporations** Axiom Acquisition Ventures, LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Jenna Wilmes Axiom Acquisition Ventures, LLC Firm/Company 12425 Race Track Rd, Ste 100 Tampa, FL 33626 City/State and Zip Code JennaW@theAxiomGrp.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Gia Defaze - Acumen Licensing Team at 516 Area Code Daytime Telephone Number Name of Person Enclosed is a check for the following amount:

☐ \$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

□ \$30.00 Filing Fee &

Certificate of Status

\$25.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

□ \$60.00 Filing Fee,

Certified Copy (additional copy is enclosed)

Certificate of Status &

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Axiom Acquisition Ventur | | w appears on our records.) | |
|---|--|--------------------------------------|----------------------|
| (<u>1511005 01 5195 2000</u> | ited Linbility Company as it no (A Florida Limited Liability Co | mpany) | |
| The Articles of Organization for this Limited I Florida document number <u>L18000047727</u> | Liability Company were file | _{d on} <u>02/22/2018</u> | and assigned |
| This amendment is submitted to amend the fol | lowing: | | |
| A. If amending name, enter the new name | of the limited liability com | pany here: | |
| The new name must be distinguishable and contain the | words "Limited Liability Compa | ny," the designation "LLC" or the al | obreviation "L.L.C." |
| Enter new principal offices address, if appli | cable: | | |
| (Principal office address MUST BE A STRE | ET ADDRESS) | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | | PIL A |
| B. If amending the registered agent and | | | - 100 B |
| registered agent and/or the new registered (| office address here: | | |
| Name of New Registered Agent: | Jae Heinberg | | |
| New Registered Office Address: | 12425 Race Track | Rd., Ste 100 | |
| | | Enter Florida street address | |
| | Tampa | , Florida <u>3</u> | 3626 |
| | 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 Nov Registered Agent

Page 1 of 3

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 | <u>Address</u> | Type of Action |
|---|--|--|-------------------|
| MGR | Roger Knauf | 12425 Race Track Rd., Ste 100, Tampa, FL | . 33626 ■ Add |
| | | | ☐ Remove |
| | | | ☐ Change |
| MGR Jae Heinberg | 12425 Race Track Rd., Ste 100, Tampa, Fl | _ 33626 ■ Add | |
| | | | Remove |
| | | | Change |
| MGR —— | Full Circle Financial Services, LLC | | Add |
| 12425 Race Track Rd., Ste 100, Tampa, I | . 33626 Remove | | |
| | | | □ Change |
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| fectiv | ve date, if other than the date of filing: (optional) citive 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 605-020' (optional) citive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) |
| ote:] | If the date inserted in this block does not meet the applicable statutory filing requirements, this date withhor be listed as |
| cume | ent's effective date on the Department of State's records. |
| rec | ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o |
| The | 90th day after the record is filed. |
| | December 13 , 2018 - |
| ated_ | December 13 |
| | |
| | Signature of a member or authorized representative of a member |
| | |

Page 3 of 3

Filing Fee: \$25.00