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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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COVER LETTER

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SUBJECT					
	· · -	Name of Li	mited Liability Company		
The enclos	ed Articles of	(Amendment and fee(s) are su	bmitted for tiling.		
Please retu	rn all corresp	ondence concerning this matte	r to the following:		
		Giovani Thibau Christofa	iro		
			Name of Person		
		Techbiz Digital Forensies USA LLC Firm/Company 2199 Ponce de Leon Blvd Address Coral Gables, FL 33134 City/State and Zip Code giovani@techbiz.com.br E-mail address: (to be used for future annual report notification) formation concerning this matter, please call: nik 305			
			Firm/Company		
		2199 Ponce de Leon Blvd			
			Address		
		Coral Gables, FL 33134			
		riovani@toobbia	Christofaro Name of Person Forensies USA LLC Firm/Company Leon Blvd Address City/State and Zip Code com.br address: (to be used for future annual report notific please call: at (305		
			to be used for future annual report.	natification.	
For further	information c			MORE AREAS	
Alex D. Sir	rulnik 				
	Name o	f Person		time Telephone Number	
Enclosed is	a check for th	re following amount:			
3 \$25.00 €	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed	

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

TO:

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

Techbiz Digital Forensics USA LLC		
(Name of the Limited L (A F	hability Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liabil	lity Company were filed on May 10, 2018	and assigned
Florida document number L18000117545	·	
This amendment is submitted to amend the following	ોદુ·	
A. If amending name, enter the new name of the	· limited liability company here:	
Forenease LLC		
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable	×	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BON</u>	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>ent</u> address here:	NIT of the me of
Name of New Registered Agent:		ूँच 🎅 🛅
New Registered Office Address:		09 8: 0 1 A C C C C C C C C C
	Enter Florida street address	0 m 6
-	Florida	
	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
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fective date, if other than n effective date is listed, the date ote: If the date inserted in the cument's effective date on the	is block does not	nd cannot be prior to I meet the applica	o date of filing	or more than 90 d	lavs after filing.) Pi	irsuant to I not be	o 605.02 listed :
record specifies a dela The 90th day after the	record is filed	1.			2:01 a.m. on	the e	arlier
June, 2nd ted	·	2019 a member or author	-·	[[]			

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Filing Fee: \$25.00