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| Special Instructions to Filing Officer: |
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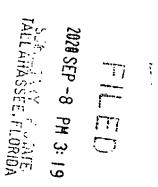
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## **COVER LETTER**

| TO:       | Registration of | on Section<br>Corporations   |  |                      |   |
|-----------|-----------------|--|--|----------------------|---|
| SUBJEC    |                 | es Rios International LLC  | •  |                      |   |
|           |                 | Name of Li   | mited Liability Company                                    |                      |   |
|           |                 | es of Amendment and fee(s) are surespondence concerning this matte | -  |                      |   |
|           |                 | Frances Rios   |  |                      |   |
|           |                 | Women Who Lead LLC   | Name of Person   |                      | 2028 SEP  |
|           |                 | 1305 Morgan Stanley Av   | Firm/Company<br>e. Unit 411                                |                      | -8  |
|           |                 | Winter Park, FL 32789  | Address  |                      | PH 3: 19 PH 3: 19   |
|           |                 | karla@francesrios.com  | City/State and Zip Code                                    |                      |   |
| For furth | er informat     | E-mail address:<br>ion concerning this matter, please              | tto be used for future annual call:                        | report notification) |   |
| Frances   | Rios            |  | 787 69<br>at ( )   | 01-0993              |   |
|           | Ni              | une of Person  | Area Code  | Daytime Telephone N  | umber   |
| Enclosed  | l is a check    | for the following amount:  |  |                      |   |
| \$25.     | 00 Filing Fo    | ee □ \$30.00 Filing Fee & Certificate of Status                    | □ \$55.00 Filing Fee Certified Copy (additional copy is en | Cer<br>closed) Cer   | .00 Filing Fee. rtificate of Status & rtified Copy ditional copy is enclosed) |
|           |                 | AILING ADDRESS:  |  | T/COURIER ADDRES     | SS:   |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee. FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Frances Rios International LLC                                     |   |                     |
|--|---|---------------------|
| ( <u>Name of the Limited Liability C</u><br>(A Florida Lin         | Company as it now appears on our records.) mited Liability Company) |                     |
| The Articles of Organization for this Limited Liability Com        | npany were filed on June 25, 2018                                   | and assigned        |
| lorida document number L18000155480                                |   |                     |
| his amendment is submitted to amend the following:                 |   |                     |
| . If amending name, enter the new name of the limited              | I liability company here:   |                     |
| Women Who Lead LLC   | <u></u>   | 70                  |
| he new name must be distinguishable and contain the words "Limited |   | /A 11               |
| inter new principal offices address, if applicable:                | SS)   | SEP                 |
| Principal office address MUST BE A STREET ADDRES                   | <u>so</u>   | × 0 m               |
|  |   | 3 3                 |
|  |   | H 3: 19             |
| nter new mailing address, if applicable:                           |   | <u>ज</u> ुल ७       |
| Mailing address MAY BE A POST OFFICE BOX)                          |   |                     |
|  |   |                     |
|  |   |                     |
| 3. If amending the registered agent and/or register                | ed office address on our records, en                                | ter the name of the |
| egistered agent and/or the new registered office address           | <u>s 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                          |
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| rective date, if other than the date of filing:  n effective date is listed, the date must be specific and cannot be prior to the:  If the date inserted in this block does not meet the applica cument's effective date on the Department of State's records. |                       |                  | ing.) Purst                           |             |
| record specifies a delayed effective date, but not<br>he 90th day after the record is filed.   | t an effective ti     | me, at 12:01 a.r | n. on th                              | ne earlier  |
| rede August 20 . 2020  | <u>)</u> . /          | fr.              |                                       |             |
| <u>U</u>   | ////                  | W                | <u></u>                               |             |
| Signature of a member or author  | rized refresoritative | ot a member      |                                       |             |
|  |                       |                  |                                       |             |

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Filing Fee: \$25.00