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.

(((H20000265972 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : 120000000146 Phone : (305)444-4994

: (305)444-4977 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	
-------	----------	--

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FIVE SIXTY, LLC

Certificate of Status	0
Certified Copy	U
Page Count	04
Estimated Charge	\$25.00

Y SULKER

AUG 07 2020 Help

Electronic Filing Menu

Corporate Filing Menu

Page 3 of 5

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records. bility Company)	J
The Articles of Organization for this Limited Liability Company w Florida document number $\frac{L18000177634}{L18000177634}$	ere filed on 07/24/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
MERCURY ONE GROUP, LLC		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office adapted and/or the new registered office address here:	ldress on our records, <u>enter t</u>	20 AUS - 6 AH H: 45
Name of New Registered Agent:		
New Registered Office Address:	,,	
	Enter Florida street address	
	, Flo	rida
•	Cuy	Zip (, ode
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as pr	performance of my duties, an	d Lam familiar with and

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:

<u>Title</u>	<u>Name</u>	Address	Type of Acti
			□Add
			□ Remove
			☐ Change
			□Add
			□Remove
			□Change
and the state of t			□Add
		Marca	
			□Add
			□Remove
			□Change
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change

_	
ffective	e date, if other than the date of filing: (optional) ive date is listed, the date must be specific and cunnot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020
Vote: If	ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after thing.) Pursuant to 602.020 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at 's effective date on the Department of State's records.
record s d is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the
Dated	1
	/s/Karen Lassus
	Signature of a member or authorized representative of a member
	/o/ Karen Lassus Signature of a member or authorized representative of a member KAREN LASSUS