L18000191879

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: Received union 5/6/22
Member Signature
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> FILED 2022 HAY "6 PM 12: 52 SECRETARY OF STATE

A. BUTLER MAY - 6 2022

COVER LETTER

7O:	Registration Se Division of Cor		·					
eo (10 1157	BITPAGE		. ,					
SUBJEA	Name of Limited Liability Company							
		Amendment and fee(s) are submondence concerning this matter t						
		Pavan Kumar Kasu						
			Name of Person					
		BITPAGE LLC						
	Firm/Company							
	700 s rosemary ave. suite 204-186							
Address WEST PALM BEACH, FL 33401								
								
		pkkasu@yahoo.com	o be used for future annual report notific	eation)				
For furt	her information c	concerning this matter, please ca						
	Cumar Kasu		561 2140586					
		of Person	at ()	Telephone Number				
Enclose	d is a check for t	he following amount:						
□ \$ 25	.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ 555.00 Filing Fee &: Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed)				
	Mailing Addre	<u>ss:</u>	Street Address: Registration Sec	tion				

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

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company) BITPAGE LLC SECRETARY OF STATE
TALLAHAMEREJEHUTE The Articles of Organization for this Limited Liability Company were filed on Aug 10, 2018 Florida document number L18000191879 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: GROOMLY 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = -) AMBR =	Manager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			
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			Change
			□Add
			□Remove
			□Change
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If amending any oth	er information, enter ch	ange(s) here: tAttac	h additional sheets.	tf neversiaty.)
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document's effective	date on the Department of S	State's records		
the record specifies a de rord is filed	layed effective date, but not	ran effective time, at 1	2:01 a m on the earlie	er of (b). The 90th day after the
Apul =		2022		
Dated				
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	Ngnahll	Thember or authorized re	presentative of a membe	·
DAVAN S	KUMIAR KASU			
		Typed or printed name	of signee	

Filing Fee: \$25.00



February 2, 2022

PAVAN KUMAR KASU 700 S ROSEMARY AVE SUITE 204-186 WEST PALM BEACH, FL 33401

SUBJECT: BITPAGE LLC Ref. Number: L18000191879

We have received your document for BITPAGE LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 622A00002606

Anissa Butler Regulatory Specialist II