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'Docusign, Envelope ID: 74D9F4D1-7687-4038-9A95-EEE2BF1AD8BE **COVER LETTER** TO: Registration Section Division of Corporations MARKIT INTERACTIVE LLC SUBJECT: ____ 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: CHRISTOPHER TOURIZ Name of Person Firm/Company 10550 NW 69 Ter Address Doral, FL 33178 City/State and Zip Code chris@markitinteractive.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Christopher Touriz ____at (<u>786</u>)__ Name of Person Enclosed is a check for the following amount: ☐ \$60,00 Filing Fee. ☐ \$30,00 Filing Fee & ☐ \$55.00 Filing Fee & 🗵 \$25,00 Filing Fee Certificate of Status & Certified Copy Certificate of Status Certified Copy (additional copy is enclosed) (additional copy is enclosed)

Mailing Address:

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

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FI, 32303 Docusign, Envelope ID. 74D9F4D1-7687-4038-9A95-EEE2BF1AD8BE

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	RKIT INTERACTIVE LLC		
(Name of the Limited I	iability Company as it now appears lorida Limited Liability Company)	on our records.)	======================================
The Articles of Organization for this Limited Liabi	lity Company were filed on	11/20/2018	and assigned
Horida document numberL18000270355			హ
This amendment is submitted to amend the following	បតិ៍:		:-
A. If amending name, enter the new name of the	e limited liability company her	<u>·e</u> :	
TIG DIGITAL LLC			
he new name must be distinguishable and contain the words	"Limited Liability Company," the de	signation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable	e:		
Principal office address MUST BE A STREET A			
rrincipai office adaress 51031 BEASTREETA	DDRESS)		
			
Enter new mailing address, if applicable:	<u></u>		
Mailing address MAY BE A POST OFFICE BO.	X)		
		-	
	· · · · · · · · · · · · · · · · · · ·		_
B. If amending the registered agent and/or regis	stored affice address on our re	cords, enter the nan	ie of the new regis
gent and/or the new registered office address h		cordin chier vice in in	· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent:	DANIEL MOROS		
New Registered Office Address:	17801TWISTED MA	ANDARIN ALY	
The transfer of the factors.	Enter Florie	la street address	 -
	WINTER GARDEN	Florida	34787
-	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.

II Changing Registered Agent, Signature of New Registered Agent

'Docusign Envelope ID: 74D9F4D1-7687-4038-9A95-EEE2BF1AD8BE in amending Authorized rerson(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	Address	Type of Action
			□Add
			TRemove
			□Change
			□Add
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	<u> </u>		□Add
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]Change
			= Add
			TRemove
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			∏Change

			
			
			
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ective date	e, if other than the date of	filing:	(optional)
effective da e: If the d	te is listed, the date must be speci ate inserted in this block does	ific and cannot be prior to date of filing or mo s not meet the applicable statutory filing	re than 90 days after filing.) Pursuant to 605,02 requirements, this date will not be listed
	fective date on the Departmer		·
	ies a delayed effective date, b	ut not an effective time, at 12:01 a.m. or	n the earlier of: (b) The 90th day after th
s filed.			
		000:	기
ed	November 26	2024	703A
	Signed by		
	Signature Signature	e of a member or authorized representative of	of a member (5)

Daniel Jose Moros Casique
Notary Public
State of Florida
Comm# HH125429
Expires 5/3/2025