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COVER LETTER

	sion of Corp			
SUBJECT:	eMoyo USA	, LLC		
SUBJECT.		Name of Limi	ted Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	nitted for filing.	
Please return	all correspon	ndence concerning this matter t	to the following:	
		Grant Talbot		797
			Name of Person	
		eMoyo USA, LLC		
			Firm/Company	ω ¬ !
		12780 Marsh Pointe Way F	Palm Beach Gardens FL 33418	PH 3: 03
			Address	2928 AUG -3 PH 3: 03
		grant.talbot@emoyo.net	City/State and Zip Code	
		• •	to be used for future annual report not	ification)
For further in	nformation co	oncerning this matter, please ca	all:	
Grant Talbot	:		561 676-0327 at ()	
	Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg Div P.C	iling Address gistration S vision of C D. Box 632 llahassee, l	Section Corporations 17	Street Address: Registration So Division of Co The Centre of 2415 N. Mon- Tallahassee, F	orporations Tallahassee oe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

eMoyo USA, LLC		
(<u>Name of the Limited Liability Company</u> (A Florida Limited Liab	as it now appears on our records.) ollity Company)	
The Articles of Organization for this Limited Liability Company we Florida document number L18000289140	ere filed on December 17, 2018	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabilit	y company here:	
AdventEar, LLC		: %
he new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the	abbreviation "L.L.C."
ne new name must be distinguishable and contain the words "Limited Liability		
nter new principal offices address, if applicable:		,, ω
Principal office address MUST BE A STREET ADDRESS)		70 1
-		<u></u>
		$\mathcal{L}_{\mathcal{L}}}}}}}}}}$
nter new mailing address, if applicable:		20 03
Mailing address MAY BE A POST OFFICE BOX)		
		_
-		
3. If amending the registered agent and/or registered office adegent and/or the new registered office address here:	dress on our records, <u>enter the na</u>	ime of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, 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 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>	Name	Address	Type of Action
			□ Add
			□Remove
			Change
	- 		Add
			☐ Add ☐ Remove
			⊖ ☐Change
			□Remove
			□Change
			DAdd
			Remove
			Change
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Effective date, if other than a fan effective date is listed, the date Note: If the date inserted in this document's effective date on the	s block does not meet the appl	icable statutory filing	(optic re than 90 days after requirements, this	onal) filing.) Pursuant to date will not be	605.020 listed a
e record specifies a delayed effe d is filed.	ctive date, but not an effective	time, at 12:01 a.m. o	n the earlier of: (b) The 90th day	after th
Dated July 29	2020	·			
	Signature of a member or au	thorized representative	of a member		

. . . .

Filing Fee: \$25.00