L1900001467

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(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	



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HILED 2022 SEP -6 PH 2: 42 SECRETARY OF STATE TALLAHASSEE, FL

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TO: Registration So Division of Cor				
SONSOUR	CE LLC		, ,	•
SUBJECT:	Name of Lin	iited Liability Company		1
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	RODNEY SHELTON			
		Name of Person		
	SONSOURCE LLC			
		Firm/Company		
	3124 W PLEASANT LN			
		Address		<u> </u>
	PHOENIX, AZ 85041			
		City/State and Zip Code		
	Ile@sonsource.com	to be used for future annual		
12 and an in Company			терон поннеан	(91)
	oncerning this matter, please e			
RODNEY SHELTON		at ()	59111	
Name o	f Person	Area Code	Daytime Tel	lephone Number
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee of Certified Copy (additional copy is end)		S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		<u>Street A</u> Douiste		
Registration S Division of C			ation Section on of Corpora	
P.O. Box 632	7	The Ce	ntre of Talla	hassee
Tallahassee, FL 32314 2415		2415 N	. Monroe St	reet, Suite 810

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2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SONSOURCE ELC

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

The Articles of Organization for this Limited Liability Company Florida document number <u>L19000001467</u> .	were filed on <u>12,19,2018</u> and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company." the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (<i>Principal office address MUST BE A STREET ADDRESS</i>)	3124 W PLEASANT EN, PHOENIX, AZ 85041
Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE BOX)</u>	3124 W PLEASANT LN, PHOENIX, AZ 85041
B. If amending the registered agent and/or registered office a <u>agent and/or the new registered office address here</u> :	uddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	Enter Florida street address
	, Florida

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, <u>enter the title, name, and address of each person-being addee</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

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Title	Name	Address	Type of Action
AMBR	LORRIE SHELTON	3124 W PLEASANT LN, PHOENIX, AZ 85041	🗆 Add
			Remove
			□Change
AMBR	GREGG DANIELS	10869 N SCOTTTSDALE RD, SCOTTSDALE, AZ	<u>₹ 85</u> <u> </u> Add
			Remove
			□Change
MBR	ISAIAH SHELTON	3124 W PLEASANT LN PHOENIX, AZ 85041	■Add
			FILED RECREPTION OF STATE
			E, FL
			🗆 Change
	<u></u>		🗆 Add
			□Remove
			🗆 Change
			🖸 Add
			🖸 Remove
		······································	🗆 Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _______(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

AUGUST 29,2022 ted	12:01am	
$\Delta $	7	
<u> </u>	nature of a member or authorized representative of a member	
RODNEY SHELTON	Tura Lagarinta Lumas at insus	

Typed or printed name of signee