1190000 97429

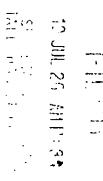
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COVER LETTER

TO:	Registration Se Division of Cor		•	
SUBJ		e Data, LLC		
3000		Name of Lim	ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Alexander Hoffmann		
		Look at the Data, LLC	Name of Person	
		605 West Flagler Street	Firm/Company	
		Miami, FL 33130	Address	
		admin@latd.ai	City/State and Zip Code	1-1
		E-mail address: (to be used for future annual report notif	ication)
For fu	rther information e	oncerning this matter, please or	all:	
Alex I	Hoffmann		305 747-1750 at ()	
	Name o	f Person	Area Code Daytime	e Telephone Number
Enclos	sed is a check for th	ne following amount.		
≡ \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60 00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Look at the Data, LLC		
(Name of the Limited Liability Compa (A Florida Limited l	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000097429</u> .	were filed on April 08, 2019 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Linbi	fity Company," the designation "LLC" or the abbreviation "LLC"	
Enter new principal offices address, if applicable:	605 West Flagler Street	
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33130	
Enter new mailing address, if applicable:	605 West Flagler Street	
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33130	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on our records, <u>enter the name of the n</u> e:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	Cite Zin 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 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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Alexander Hoffmann	605 West Flagler Street Miami, FL 33130	Add
			Remove
	Bernardo Lopez	605 West Flagler Street	∃ Change
MGR		Miami, FL 33130	
			□ Remove
			Change
			☐ Remove
			☐ Change
			Add
			□ Remove
			Change
			□ Remove
		-	□ Change
			Add
		 	☐ Remove

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(Han ell Note:	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	July 23rd 2019
	Signature of a member or authorized representative of a member
	Alexander Hoffmann
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00