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COVER LETTER

	gistration Se vision of Cor				
SUBJECT:		ke Tango Software L.L.C.			
30bar.c.i.	-	Name of Lim	ited Liability Company		
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return	ı all correspo	ndence concerning this matter	to the following:		
		Jenny Countz			
			Name of Person		
		ZenBusiness Inc			
			Firm/Company		
		5511 Parkerest Dr., Suite I	207		
			Address		
		Austin, TX 78731			
		fulfillment@zenbusiness.cc	City/State and Zip Code		
			to be used for future annual report notil	fication)	
For further in	nformation c	oncerning this matter, please ca	all:		
Jenny Coun	tz.		844 493-6249 at ()		
	Name o	f Person		e Telephone Number	
Enclosed is a	a check for th	ne following amount:		- 1	
■ \$25.00 F	filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy radditional copy is enclosed)	')
	Registr Divisio P.O. Bo	ation Section n of Corporations ox 6327 issee, FL 32314	STREET/COURT Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	n ations & S	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gemini Lake Tango Software L.L.C.	
(Name of the Limited Liability Compa (A Florida Limited	nny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.19000120819}{}$.	were filed on 05/03/2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liah	oility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C,"
Enter new principal offices address, if applicable:	3320 S Semoran Blvd
(Principal office address MUST BE A STREET ADDRESS)	ΑΡΓ 10
	Orlando, FL 32822
Enter new mailing address, if applicable:	3320 S Semoran Blvd
(Mailing address MAY BE A POST OFFICE BOX)	ΑΡΓ 10
	Orlando, FL 32822
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida S
	City Zip Code 7
New Registered Agent's Signature, if changing Registered Agent:	2
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and orovided for in Chapter 605, F.S. Or, if this document is

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Jonathan Baker	3320 S Semoran Blvd	
		APT 10	□ Add
		Arriv	☐ Remove
		Orlando, FL 32822	
		<u> </u>	Add
			Remove
			Change
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ective date, if other than the dat n effective date is listed, the date must be :	e of filing:		(optional)	
te: If the date inserted in this block (does not meet the applicable	late of filing or more than 90 c statutory filing requirer	0 days after filing.) Pursuar ments, this date will not	it to 605.020 be list e d a
cument's effective date on the Depart	tment of State's records.		3	;
	ente i diki bi i			
record specifies a delayed eff he 90th day after the record	is filed.	n enecuve time, at	12:01 a.m. on the	earlier o
			24	7
ed August 13	2021	-	-	7)
Ist langthan Dalesa				
/s/ Jonathan Baker Sign	nature of a member or authorize	ed representative of a member	ber	

Page 3 of 3

Filing Fee: \$25.00