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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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2022 HAR -4 AM 10: 25 SECRETARY OF STATE

A. BUTLER MAR 14 2022

COVER LETTER

TO:

Registration Section

Divi	sion of Cor	porations				
	PLATFOR					
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		GERDI STEENEKAMP				
			Name of Person			
			Firm/Company			
		2900 N PALM AIRE DR	#101			
			Address			
		POMPANO BEACH, FL	33069			
			City/State and Zip Code			
		STEENEKAMPGERDI@C				
			to be used for future annual report no	otification)		
For further in	formation c	oncerning this matter, please c	all:			
GERDI STEENEKAMP		954 909-9198 at ()				
Name of Person		Area Code Dayti	me Telephone Number			
Enclosed is a	check for th	ne following amount:				
■ \$25.00 F	iling 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)		
	ling Addres		Street Address:	ection		
Registration Section Division of Corporations		Registration Section Division of Corporations				
P.O	. Box 632	7	The Centre of	The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monr	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

PLATFORM3, LLC

(Name of the Limited Liability Company as it now appears on Alla Liability Company)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company v	were filed on AUGU	ISTAL POLASSEE, Fand assigned
Florida document number L19000205826		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
P3 DATA TECH, LLC		
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	-11	
B. If amending the registered agent and/or registered office a	ddress on our reco	rds, enter the name of the new registered
agent and/or the new registered office address here:		
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>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Add
			□Remove
			Change
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			Remove
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Effective date, if other than the date from effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	k does not meet the ap	plicable statutory fil	(option of the control of the contro	onal) filing.) Pursuant to 605.0 s date will not be listed)207 (I as t
e record specifies a delayed effective d d is filed.	ate, but not an effectiv	ve time, at 12:01 a.m	on the earlier of: (b) The 90th day after t	the
Dated	, 2022				
		9 .			
Si	gnature of a member or a	authorized representati	ve of a member		