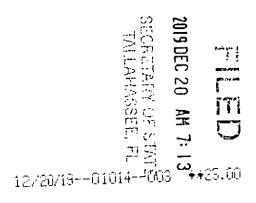
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O SIMMONS JAN 22 2020

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	iPos Point of	Sale Corp LLC	
	Name of Lin	nited Liability Company	
The enclosed Articles of A	Amendment and fec(s) are sub	omitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
		Florence King Name of Person	
		The Orlando Law Group, Pl Firm/Company	
	1	2301 Lake Underhill Road, S Address	Suite 213
		Orlando, Fl. 32828 City/State and Zip Code	_
	fking@ E-mail address:	Otheorlandolawgroup.com to be used for future annual report not	ification)
For further information co	ncerning this matter, please c	all:	
Florence		at (407) 512 -439 Area Code Daytim	4
Name of	Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	following amount:		
X \$25.00 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 Se		<u>Street Address:</u> Registration Se	ction
Division of Co	rporations	Division of Cor	porations
P.O. Box 6327		The Centre of T	Fallahassee e Street Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

iPos Point of Sale Co (<u>Name of the Limited Liability Co</u> (A Florida Limi	rp LLC mpany as it now appears on o ted Liability Company)	ur records.)		
The Articles of Organization for this Limited Liability Comp	any were filed onAugu	st 16, 2019	and assigne	:d
Florida document number 1 19000209089				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	liability company here:		SI 26	
iPos Intuitive Point of Sale LLC The new name must be distinguishable and contain the words "Limited I.		:	型管 38 -	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designa	tion "LLC" or the a		Andreas Services
Enter new principal offices address, if applicable:			20 A 1	; ; ; ; ;
(Principal office address MUST BE A STREET ADDRESS	2	 -	<u> </u>	<u></u>
			<u> </u>	
			73	
Enter new mailing address, if applicable:			·	
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ce address on our record	s, <u>enter the nar</u>	me of the new re	<u>zistered</u>
ALEM SIMON THE NEW TELISTOPE WITH AUGUST HETE.				
Name of New Registered Agent: Flor	ence King			_ _
New Registered Office Address:1230	01 Lake Underhill Roa Enter Florida str	ad, Suite 213 Pet address	3	
	Orlando	, Florida	32828	
	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.

Many Hame. Ling

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR_	Zulfie R. Rajakariar		
			□Remove
			⊠ Change
			SEGRET ALLE
			ECORETA POR CONTROL OF THE STANDARD STA
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□ Remove
			□Change
			□Add
			Remove
			Change

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). II am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe Note:	ve date, if other than the date of filing:
he record ord is fil	d 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 ed.
Dated	December 41th 2019.
	Signature of Amember authorized representative of a member
	Zulfie R. Rajakariar Typed or printed name of signee

Filing Fee: \$25.00