## L19000215214

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TO:	Registration Se Division of Cor			
	KARROT I	ECHNOLOGIES LLC	. •	
SUBJE	ECT:	Name of Limi	ted Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please	return all correspo	ndence concerning this matter i	to the following:	
		LOVETTE DOBSON		
			Name of Person	
		INCFILE.COM LLC		
		<del></del> .	Firm/Company	<u>, , , , , , , , , , , , , , , , , , , </u>
		17350 STATE HWY 249 S	STE 220	
		······································	Address	
		HOUSTON, TX 77064		
		<u></u>	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
• .		EFILE1234@INCFILE.CO E-mail address: 0	M to be used for future annual rep	ort notification)
For fur	ther information c	oncerning this matter, please ca		
LOVE	TTE DOBSON		855 859-9 at ( )	090
	Name o	fPerson		Daytime Telephone Number
Enclos	ad is a shock for t	he following amount:		
	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclos	<ul> <li>\$60.00 Filing Fee, Certificate of Status &amp;</li> <li>Certified Copy (additional copy is enclosed)</li> </ul>
	Regist Divisi	ING ADDRESS: ration Section on of Corporations lox 6327	Registratio	Corporations

Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KARROT TECHNOLOGIES LLC

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

The Articles of Organization for this Limited Liability Company were filed on  $\frac{08/22/2019}{2}$ and assigned Florida document number L19000215214

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

1332 SR A1A

Enter new principal offices address, if applicable: (Principal office address MUST <u>BE A STREET ADDRESS)</u>

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1332 SR ATA

PONTE VEDRA BEACH, FL 32082

PONTE VEDRA BEACH, FL 32082

B. If amending the registered agent and/or registered office address on our records, 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 add	dress
		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, <u>enter the title, name, and address of each person\_being added</u> or removed from our records:

## MGR = Manager

<u> </u>	<u>Name</u>	Address	Type of Action
AMBR	STEVEN HINES	1332 SR A1A	🖾 Add
		PONTE VEDRA BEACH. FL 32082	Remove
			Change
AMBR	KRISTOFOR KOCAN	1332 SR ATA	Add
		PONTE VEDRA BEACH, FL 32082	Remove
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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.

Dated SEPTEMBER 6 , 2019 .

Steven

HIMES Signature of a member or authorized representative of a member

STEVEN HINES - AMBR

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00