

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Evolve Academy, LLC   |  |
|---|--|
| t <u>Name of the Limited Liability Comp</u><br>(A Florida Limited         | any as it now appears on our records.)<br>Liability Company)       |
| The Articles of Organization for this Limited Liability Company           | were filed on $\frac{12}{17}$ , 2019 and assigned                  |
| Florida document number19000302049  |  |
| This amendment is submitted to amend the following:                       |  |
| A. If amending name, <u>enter the new name of the limited liab</u>        | <u>pility company here:</u>  |
| Evolve IP, LLC  |  |
| The new name must be distinguishable and contain the words "Limited Liabi | ility Company," the designation "ULC" or the abbreviation "U.U.C." |
| Enter new principal offices address, if applicable:                       |  |
| Principal office address MUST BE A STREET ADDRESS)                        |  |
|   | <u>()</u>  |
|   | 2020   |
| Enter new mailing address, if applicable:                                 | <b>≃</b> ()  |
| Mailing address MAY BE A POST OF FICE BON                                 |  |
| Suming underst SPAT DE ATVATVITICE DUNT                                   |  |
|   |  |
| B. If amending the registered agent and/or registered office              | address on our records, enter the name of the new register         |
| agent and/or the new registered office address here:                      | ш.<br>С  |
|   | 0  |
| Name of New Registered Agent:   |  |
| New Registered Office Address:  |  |
|   | Enter Florida street address                                       |
|   | . Florida  |
|   | Cuy 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 Changing Registered Agent, Signature of New Registered Agent

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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> | Address | Type of Action |
|-------|-------------|---------|----------------|
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Fax Audit No. H200002905363

| lffec<br>Fan e | tive date, if other than the date of filing:   |
|----------------|--|
| Vote:          | If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nont's effective date on the Department of State's records. |
| rece<br>d is t | ind 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 field.  |

D. If amending any other information, enter change(s) here: (Attach additional sheats, if necessary.)

| Dated 8/13     | 2020  |
|----------------|---|
|                |   |
| Sign.          | unic of a member or authorized representative of a member |
| Tyler J. Mayne | ••••••••  |

Typed or printed name of signee