Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210002005673)))



		ZOZI HAY
To:	Division of Corporations	<u>√</u> -<
	Fax Number : (850)617-6383	√f 5
		in = in = 1
Prom:	Addount Name : LEGALZCOM.COM INC.	
	Account Number : 120010000062	
	Prone : (323)962-8600	- 1200 H
	Fax Number : (323)962-3889	

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TYPE-RECORDER LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

Electronic Filing Menu Corporate Filing Menu

Help

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COVER LETTER

	CORDER LLC		
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subm	nitted for filling.	
Please return all correspon	ndence concerning this matter to	o the following:	
	Cheyenne Moseley		
		Name of Person	
	Legalzoom.com, Inc.		6 1921 H
		Firm/Company	1-11
	101 N Brand Blvd 11th Fl		
		Address	
	Glendale, CA 91203		PH I: 52
		City/State and Zip Code	
	loransaggu@hotmail.com		
	,	o be used for future annual report notifi	cation)
	concerning this matter, please ca	800 773-0888	
Cheyenne Moseley		at ()	Telephone Number
Nume o	af Person	Area Code Daytime	Telephone (Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fcc, Certificate of Status & Certified Copy (additional copy is enclosed)
		CTD FUT/COURT	OD ADDESC

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

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

From: Sylvia Pauli

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TYPE-RECORDER LLC (Name of the Limited Liability Core) (A Florida Limit	mpany as it now appears on our records. ted Liability Company))		
The Articles of Organization for this Limited Liability Company were filed on 05/11/2020 Clorida document number £20000125845		and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	liability company here:			
Rooster Software LLC				
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC"	or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	21			
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	The same of the sa		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)		IF in		
Training Made too water by		77 73		
B. If amending the registered agent and/or registere registered agent and/or the new registered office address	ed office address on our records here:	, enter the name of the		
Name of New Registered Agent:				
New Registered Office Address:	Enter Floridu street addres	s		
		orida		
	City	Zıp 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.

From: Sylvia Paull LegalZoom.com, Inc.

To: 18506176383 Page: 5 of 6

MGR = Manager

2021-05-19 08:55:03 PDT

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = A	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
			Change
			☐ Add
		<u></u>	STOREMOVE TO Remove
			Change
			☐ Remove
			Change
			Remove
			Change
	·	D Add	
			□ Remove
			☐ Change
			□ Add
			☐ Remove
			☐ Change

D. If ame	nding any o	ther information, ent	er change(s) here: (Attach addition	al sheets, if necessary.)	
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(if an e <u>Note:</u>	ffective date is l If the date in	listed, the date must be speci nserted in this block does	filing: fic and cannot be prior to date of filing or me s not meet the applicable statutory filing	ore than 90 days after filing.)	Pursuant to 605.0207 (3)(b) vill not be listed as the
docus	ment's effectiv	ve date on the Departmen	nt of State's records.		
If the re	ecord specif	fies a delayed effect	tive date, but not an effective t	ime, at 12:01 a.m. c	on the earlier of:
(b) Th	e 90th day	after the record is I	filed.		

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Typed or printed name of signee

Lorander Saggu

ember ar authorized representative of a member

Filing Fee: \$25.00