2/9/24, 9:19 AM

Division of Corporations

## Elorida Department of State Division of Combrations Blacktronic Filing Cover Model Compartment of State Operations Compartment of State Operations Compartment of State Operations Compartment of State Operations Operations

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.

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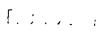
Tp:			,
	Division of Co		<b>=</b>
	Fax Number	: (850)617-6383	AHASS
From:			
	Account Name	: LEGALZOOM.COM INC.	, '
	Account Number	: I20010000062	•
	Phone	: (323)952-8600	,
	Fax Number	: (323)389-0502	

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ANAGLYPH LLC

Certificate of Status	()
Certified Copy	1
Page Count	06
Estimated Charge	855,00

Corporate Filing Menu

Heip



From, Rajiv Srivastava

#### **COVER LETTER**

TO:	Regi. Divis	stration Se sion of Cor	ction porations		
SUBJEC		ANAGLYF	PH LLC		
SUBJEC	.11 _		Name of Limited	Liability Company	
The enclo	sed .	Articles of .	Amendment and fee(s) are submi	tted for filing.	
Please ret	นการ	ıll carrespo	ndence concerning this matter to	the following:	
			Cheyenne Moseley		
			Legalzoom.com, Inc	Name of Person	
				FunivCompany	
			101 N Brand Blvd 11th Fl		
				Address	······
			Glendale, CA 91203		
		11.29	josly@anagly.phpictures.com	City/State and Zip Code	en telak tizate en sam
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Cheyenno			the Parket No.	800 773-00 at ( )	
		Name of	Person		Daytime Telephone Number
Enclosed	is a c	heck for the	e following amount		
□ \$25.0°	t) Fili	ing Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed	□ \$60.00 Fitting Fee. Centificate of Status & Centified Copy (additional copy is enclosed)
general i	· : *	n. Registm Division P.O. Bo	Programme to the wins cure	STREET/Co Registration Division of C Clifton Build 266T Execut Tallahassee	Corporations ling (1994) 1999 the Center Circle
			to the transfer		

To:

# ARTICLES OF AMENDMENT . TO ARTICLES OF ORGANIZATION OF

ANAGLYPH LLC		
(Name of the Limited Lighil (A Flood	ity Company as it now appears on our re- a Limited Liability Company)	rords.)
The Articles of Organization for this Limited Liability ( Florida document number L20000143060	Company were filed on 05/26/2020	and assigned
This amendment is submitted to amend the following.		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
		<b>202</b>
Enter new mailing address, if applicable:		4FEB
(Mailing address MAY BE A POST OFFICE BOX)		2
-		SE PH
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our reco lress here:	ords, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida sweet ad	dress
		Florida
	Ciţv	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

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
AMBR	Bronnan King	633 36th street, Richmond, CA 94805	
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• •	Page: 21 of 21	2024-02-09 15,49 22 PST	13236068205	From: Rajiv Sriva:
D. If am	ending any other informat	tion, enter change(s) here: (Attach ac	dditional sheets, if necessary)	
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(II an eli <u>Note:</u>	ective date is listed, the date must	date of filing:	(optional) for more than 90 days after filing.) Pursuant filing requirements, this date will not b	to 605.0207 (3)(b) be listed as the
	cord specifies a delayed 90th day after the reco	effective date, but not an effecti ord is filed.	ve time, at 12:01 a.m. on the	earlier of:
Dated	January 25			
		AA		
	<del></del>			
	•	Signature of a member of authorized represent	lative of a member	
	Joshua Quillin	Signature of a member of a althorized represent	ative of a member	

To:

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Filing Fee: \$25.00