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6. HUNT 04/16/21 CORPORATION SERVICE COMPANY 1201 Hays Street

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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ACCOUNT NO.	: 12000000195	
REFERENCE	: 420211. 77040	032
AUTHORIZATION	Town AC	3i @
COST LIMIT	: \$ 25.0	The same of the sa
ORDER DATE : April 16, 2024	-	
ORDER TIME : 2:17 PM		
ORDER NO. : 420211-005		
CUSTOMER NO: 7704032		या है। (1) (1)
DOMESTIC AMI DOMESTIC AMI NAME: THE BENTO COMPA	ENDMENT FILING ANY, LLC	MARSSEELFL
EFFECTIVE DATE:		
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCOM	RPORATION	
PLEASE RETURN THE FOLLOWING AS I	PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STAN	NDING	
CONTACT PERSON: Shauna Godbolt	EXT#	

EXAMINER'S INITIALS:

COVER LETTER

TO: Registration S Division of Co					
The Bento	Company, LLC				
SUBJECT:	Name of Lin	nited Liability Company			
	Amendment and fee(s) are sub				
	Thomas Kamvosoulis, Es				
		Name of Person			
	Brach Eichler L.L.C.				
		Firm/Company	<u> </u>	•••	ڊ
	101 Eisenhower Parkway			<i>,</i> .	<u>.</u>
		Address			
	Roseland, New Jersey 070	068			
	tkamvosoulis@bracheichle	City/State and Zip Code r.com to be used for future annual report not	of continu	AN O-US	
For further information of	concerning this matter, please c	-	псанопу	LE C))
Thomas Kamvosoulis, E	sq.	973 228-5700 at ()			
Name e	f Person	Area Code Daytin	ne Telephone Number		
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	Ci \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	
Mailing Address Registration S Division of C P.O. Box 632 Tallahassee,	Section forporations 7	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Fallahassee be Street, Suite 81	10	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	The Bento Comp	any, LLC				
(Name of the Limi	ited Liability Company (A Florida Limited Liab	as it now appears on our other Company)	records.)		-	
The Articles of Organization for this Limited L Florida document number L20000143299	Liability Company we	ere filed on May 27, 20	120	and :	assigned	d
	 -					
This amendment is submitted to amend the foll	lowing:					
A. If amending name, enter the new name o	of the limited liabilit	y company here:				
Employment Geeks LLC						
The new name must be distinguishable and contain the	words "Limited Liability	Company," the designation	"LLC" or the abb	reviation '	"L,L.C."	
Enter new principal offices address, if applic	cable:					
(Principal office address MUST BE A STREE	ET ADDRESS)				173	
					٠,٠	
					ال م محمد	
Enter new mailing address, if applicable:	_			<u> 汗:、</u>	€ 11	
(Mailing address MAY BE A POST OFFICE	BOX)			WG mg		્રાં (—≘રજ્ય
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				ZE AE	03	
B. If amending the registered agent and/or in agent and/or the new registered office addre		iress on our records,	enter the name	of the n	iew reg	<u>istered</u>
Name of New Registered Agent:	Corporation Service	ce Company				
New Registered Office Address:	1201 Hays Street					
		Enter Florida street	address			
	Tallahassee		_, Florida _ ³²³	01		
		City		Zip Cod	le	
New Registered Agent's Signature, if changing l	Registered Agent:					

1

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.

Corporation Service Company

By: Shauna Godbolt
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:

or remo	vea trom our records:			
MGR =	Manager			
AMBR:	= Authorized Member			

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□ Remove
			□ Change
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			□Remove
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			SEE STATE
			
			①Add
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(If an ef Note:	tive date, if other than the date of filing: (optional) Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be nent's effective date on the Department of State's records.	605.0207 (3 listed as th
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