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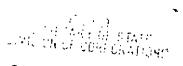
## **COVER LETTER**

TO: Registration Section

Division of Cor	porations		
SYMBOLO	OR LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	LOVETTE DOBSON		
		Name of Person	<del></del>
	INCFILE.COM LLC		
		Firm/Company	
	17350 STATE HWY 249	STE 220	
		Address	<del></del>
	HOUSTON, TX 77064		
		City/State and Zip Code	<del> </del>
	EFILE1234@INCFILE.CO		
	E-mail address: (	to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
LOVETTE DOBSON		888 462-3453	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		<u>Street Address:</u> Registration Se	ction
Division of C	orporations	Division of Cor	rporations
P.O. Box 632 Tallahassee, l		The Centre of 7	Fallahassee e Street, Suite 810
i ananassee, i	CL 32314	2413 N. MOIIIO	c sirect, suite 610

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SYMBOLOR LLC

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(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records. Liability Company)	)
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000150656</u>	were filed on <u>06/03/2020</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	450 Carillon Pkwy, Suite 100	
(Principal office address MUST BE A STREET ADDRESS)	Saint Petersburg, FL 33716	
Enter new mailing address, if applicable:	450 Carillon Pkwy, Suite 100	
Mailing address MAY BE A POST OFFICE BOX)	Saint Petersburg, FL 33716	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter t</u>	he name of the new regi
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flei	

## 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, 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 21 M4R 16 PM 4: 13	Type of Action
AMBR	JIWEI WU	450 Carillon Pkwy, Suite 100	
		Saint Petersburg, FL 33716	
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			_ □Remove
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Effective date, if other than the date of filing:  fan effective date is listed, the date must be specific and cannot be prior to date of foote:  If the date inserted in this block does not meet the applicable status document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12: dois filed.  Dated  FEBRUARY 21  2021  When the date must be specific and cannot be prior to date of footing and cannot be	filing or more than 90 days after filing.) Pursuant to 605.0207 story filing requirements, this date will not be listed as :01 a.m. on the earlier of: (b) The 90th day after the
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