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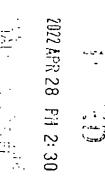
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of 10/18/2024

COVER LETTER

TO: Registration S Division of Co				
	lishing LLC			
SUBJECT: Name of Limited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Stephanie C Matthiessen			
		Name of Person		
		Firm/Company		
	14054 102nd Ave			
		Address		
	Largo, FL 33774			
		City/State and Zip Code		
	scmattie@live.com		+ 	
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report not all:	utication)	
Stephanie Matthiessen		727 504-3812 at ()		
Name of Person		Area Code Daytir	ne Telephone Number	
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addre		Street Address:	action	
Registration Section Division of Corporations			Registration Section Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

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

Persie Publishing LLC

2022 APR 28 PH 2: 30

(A Flonda Li	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Con	npany were filed on June 15, 2020	and assigned
Florida document number L20000164456		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
Nine One Five LLC		
The new name must be distinguishable and contain the words "Limited	d 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 ADDRES	(22)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	ffice address on our records, enter the	name of the new regis
	ffice address on our records, enter the	name of the new regis
agent and/or the new registered office address here:	ffice address on our records, enter the	name of the new regis
Name of New Registered Agent:	ffice address on our records, enter the	name of the new regis
agent and/or the new registered office address here:	ffice address on our records, enter the	name of the new regis

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
			□Add
			□Remove
			☐ Change
			□Add
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E. Effective date, if other than the (If an effective date is listed, the date mus Note: If the date inserted in this bloocument's effective date on the Do	it be specific and cannot be prior to cook does not meet the applicable	(option late of filing or more than 90 days after fee statutory filing requirements, this	lling.) Pursuant to 605.0207 (3)(
the record specifies a delayed effective cord is filed.	e date, but not an effective time	, at 12:01 a.m. on the earlier of: (b)	The 90th day after the
Dated April 24	. 2022		
Stophia	Signature of a member or authorize	ed representative of a member	
Stephanie C Matthiesser	1		
- -	Typed or printed n	name of signee	