K20000174695

(Re	equestor's Name)	_
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COVER LETTER

Division of Corp	porations		
		ROBOTICS LLC	
SUBJECT:	Name of Limit	ted Liability Company	
The enclosed Articles of a	Amendment and fee(s) are subt	nitted for filing.	
Please return all correspon	ndence concerning this matter t	o the following:	
	LOVETTE DOBSON		
		Name of Person	
		Firm/Company	
	17350 STATE HWY 249.		
		Address	
	HOUSTON, TX, 77064		
	EFILE1234@INCFILE.CO	City/State and Zip Code M	
	E-mail address: (to be used for future annual report notific	cation)
For further information c	oncerning this matter, please ca	nll:	202
LOVETTE DOBSON		1 888-462-3453 at ()	Telephone Number
Name o	f Person	Area Code Daytime	Telephone Number 27 Fil
Enclosed is a check for the	ne following amount:		
■ S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Coertificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

TO: Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTICLES OF O	RGANIZATION	
Ol	3	
		- 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
BENJAMIN ROI		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) lability Company)	
The Articles of Organization for this Limited Liability Company v	were filed on <u>06/23/2020</u>	and assigned 3
Florida document number L20000174695		V V
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
BENJEE ENTERPRISES LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter th</u>	e name of the new registered
agent and of the new eguine		
Name of New Registered Agent:		
N Davidsonal Office Addresses		
New Registered Office Address:	Enter Florida street address	
	. Flori	da
	City	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 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>	<u>Address</u>	Type of Action
			Remove
			Change
			□Change
			□Remove
			Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

If amending any other informa		<u> </u>		
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Effective date, if other than the (If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the E	st be specific and cannot be plock does not meet the ap	plicable statutory fr	more than 90 days after	ional) er filing.) Pursuant to 605.020 is date will not be listed a
he record specifies a delayed effective ord is filed.	e date, but not an effecti	ve time, at 12:01 a.r	n, on the earlier of: (b) The 90th day after the
Dated December, 23	2021			
		~2	,	
	Signature of a member or	authorized representat	ive of a member	
		rd Benjamin		
		printed name of signed	<u> </u>	