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Name Change

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Amendment

COVER LETTER

TO:

Registration Section

Divi	ision of Cor	porations				
	Gen-Comm	Virtual Enterprises, LLC				
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for tiling.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Cerina Anderson				
			Name of Person			
		Remote Execs, LLC				
		· · · · · · · · · · · · · · · · · · ·	Firm/Company			
		13900 Jog Road, Ste 203-2	266			
			Address			
		Delray Beach, FL 33446				
			City/State and Zip Code			
		RemoteExecs(a)outlook.cor	n to be used for future annual r	eport notification)		202
For further in	iformation c	oncerning this matter, please ca		epon nonneutron,		2021, OCT 2
Cerina Ande	rson			-9815		-
	Name o	f Person	Area Code	Daytime Teleph	one Number	PM 3: 14
Enclosed is a	check for th	ne following amount:			147	4-
□ \$25.00 F	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)		\$60,00 Filing Fee, Certificate of Stati Certified Copy (additional copy is ene	
	iling Addres		<u>Street Ad</u> Registra	dress: tion Section		
Div		orporations	Division	of Corporation of Callaha		
	lahassee, I			Monroe Stree		

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gen-Comm Virtual Enterprises LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on August 20, 2020 and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Remote Exces LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 address on our records, enter the name of the pew registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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
			□Add
			□Remove
			□Change
			□Add
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Filing Fee: \$25.00