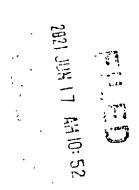
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Certified Copies	Certificates of Sta	itus
Special Instruction	s to Filing Officer:	

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JUN 18 2021 ! ALBRITTON RED SOLL OF CASE

RECEIVED

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 6/17/2021		••WALK IN••
ENTITY NAME SYMBIO	TIC ORIGIN LLC	
DOCUMENT NUMBER_		
	PLEASE FILE THE ATTACHED AND RETURI	V
XXXX	Plain Copy Certified Copy Certificate of Status	
****	LEASE OBTAIN THE FOLLOWING FOR THE ABOVE	ENTITY**
	Certified Copy of Arts & Amendments Certificate of Good Standing	
	APOSTILLE' / NOTARIAL CERTIFICATIO	W
COUNTRY OF DESTINATION NUMBER OF CERTIFICATION		
TOTAL OWED \$25.00		: I20160000072
Please call Tina at the	e above number for any issues or concerns.	Thank you so much!

COVER LETTER

	•		
CT:	Name of Lim	ited Liability Company	
losed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
	Megan Fuentes		
		Name of Limited Liability Company Indirect and fee(s) are submitted for filing. Indirect and fee(s) are submitted fee(s) are submitted for filing. Indirect and fee(s) are submitted fee(s) are submitted fee(s) a	
	ZenBusiness Inc		
		Firm/Company	
	5511 Parkcrest Dr Suite 20	7	
		Address	
	Austin, Texas, 78731		
		City/State and Zip Code	
	-		
			tification)
her information c	oncerning this matter, please c	all:	
Fuentes			
Name o	f Person	Area Code Daytin	me Telephone Number
ed is a check for th	ne following amount:		
5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
			ection
Division of C	orporations	Division of Co	orporations
	bivision of Cor Symbiotic CCT: Symbiotic CCT: losed Articles of eturn all correspondence of the corresponde	Name of Lim losed Articles of Amendment and fee(s) are subseturn all correspondence concerning this matter Megan Fuentes ZenBusiness Inc 5511 Parkerest Dr Suite 20 Austin, Texas, 78731 fulfillment@zenbusiness.cc E-mail address: (ther information concerning this matter, please concerning this matter.	Symbiotic Origin LLC CT: Name of Limited Liability Company losed Articles of Amendment and fee(s) are submitted for filing. eturn all correspondence concerning this matter to the following: Megan Fuentes Name of Person ZenBusiness Inc Firm/Company 5511 Parkcrest Dr Suite 207 Address Austin, Texas, 78731 City/State and Zip Code fulfillment@zenbusiness.com E-mail address: (to be used for future annual report no her information concerning this matter, please call: Fuentes Name of Person Area Code Daytin d is a check for the following amount: .00 Filing Fee Scrifficate of Status Certificate Copy tadditional copy is enclosed) Mailing Address: Registration Section Division of Corporations P.O. Box 6327 The Centre of

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Symbiotic Origin LLC		
(Name of the Limited Liability C (A Florida Lii	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Com-	npany were filed on 10/19/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	1 liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>	
Principal office address MUST BE A STREET ADDRES	<u> </u>	. ::10
		A 11
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		52
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, <u>enter th</u>	e name of the new registere
agent undrot the new regimened office and allowed.		
Name of New Registered Agent;		
New Registered Office Address:		
	Enter Florida street address	
<u></u>	, Flori	ida
"	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
AMBR	Carson Zide	10620 Parker's Landing Dr	
		Apt 4302	\(\begin{align*}
		Town 'N' Country, FL 33615	□Change
		***	□Add
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			□Change
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ecord specifie is filed.	s a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day aft	er the
ted	. 2021	
	Leo Giovany Louis Palmaro,	
/s/		
/s/ 	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00