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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: CYAN CONSULTANTS INC. Account Name

Account Number : I20180000074 Phone

: (321)710-2030

Fax Number : (407)650-3216

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: documents@cyancinc.com

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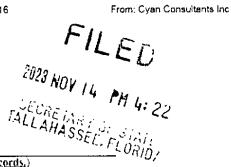
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K. SALY NOV 15 2023 Page: 3 of 6

COVER LETTER

TO: Registration Se Division of Cor			
AIVITY LI	LC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for ming,	
Please return all correspo	indence concerning this matter	to the following:	
	ANDRE COMITRE NET	o	
		Name of Person	
	AIVITY LLC		
	******	Firm Company	
	1513 \$WEET APPLE ST		
		Address	
	OAKLAND, FL 34787		
		City/State and Zip Code	.
	documents@cyancinc.com	to be used for future annual report not	เก็ตสกัดก)
For further information c	oncerning this matter, please c		
ANDRE COMITRE NE	•	407 534-4007	
	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Fiting 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 Addres Registration S		<u>Street Address:</u> Registration Se	ection
Division of C	Corporations	Division of Co	•
P.O. Box 632 Tallahassee, l		The Centre of 7	Lallahassee be Street, Suite 810
i allaliassee, i	1 to 2221T	Tailahassee, FI	

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



ALVITY LLC

2023-11-14 00:25:14 GMT

(Name of the Limi	ted Liability Compac (A Florida Limited L	iv as it now appears o lability Company)	n our records.	
The Articles of Organization for this Limited L. Florida document number 1,20000370826		were filed on 11/24	W2020	and assigned
This amendment is submitted to amend the foll	lowing:			
A. If amending name, enter the new name o	of the limited liabi	lity company here	<u>:</u> :	
NO CHANGE				
The new name must be distinguishable and contain the	words "Limited Liabil	ity Company." the desig	guation "LLC" or the	abbreviation "L,L,C."
Enter new principal offices address, if applicable:		NO CHANGE		<u>.</u>
(Principal office address MUST BE A STREE	ET ADDRESS)			
Enter new mailing address, if applicable:		NO CHANGE		
(Mailing address MAY BE A POST OFFICE	<u>(BOX)</u>			
B. If amending the registered agent and/or agent and/or the new registered office address.		ddress on our reco	ords, <u>enter the na</u>	me of the new regis
Name of New Registered Agent:	NO CHANGE			
New Registered Office Address:				
		Enter Florido	a sireer address	
	, Florida		 =	
		City		Zip Code
New Registered Agent's Signature, if changing	Registered Agent:			
I hereby accept the appointment as register provisions of all statutes relative to the pro-	ed agent and agri per and complete	ee to act in this ca performance of m	pacity. I further on the sum of t	igree to comply wit n 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

From: Cyan Consultants Inc.

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
AMBR	ARTUR ALVES GIRUNDI	RUE CASSITERITA, 1513, SANTA INES	DAdd
		BELO HORIZONTE, MG 31080-150 BR	= Remove
			□Change
AMBR	GPU LTD	RUA PIUM I 1566 APT 701	□Add
		BELO HORIZONTE, MG 30310080 BR	Remove
			□Change
AMBR	HIGOR A R FERNANDES	1513 SWEET APPLE ST	□Add
		OAKLAND, FL 34787	■ Remove
			□Change
			□Add
			Remove TALL AHA
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Effective date, if other than the dath of the date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	specific and cannot be prior to does not meet the applicable	ate of filing or more than 90 days	optional) after filing.) Pursuant to 605,0207 (3 , this date will not be listed as th
e record specifies a delayed effective da		at 12:01 a.m. on the earlier o	f: (b) The 90th day after the
rd is filed.			
Dated NOVEMBER 10th	. 2023		
ÿ,	0.10		

Typed or printed name of signee