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(Requestor's Name) (Address) (Address)	800360745348
(City/State/Zip/Phone #)	02/26/2101030002 ++25.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	1、昭2 25 昭 年 2
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CAPITAL CONNECTION, INC.	
417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301	
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222	1

APEX ONLINE SERIVCES' LLC

				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Ait, of Amend, File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
				Photo Copy
				Certificate of Good Standing
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# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#### APEX ONLINE ONLINE SERVICES, 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 02/09/2021	and assigned
Florida document number 1.21000050861	

This amendment is submitted to amend the following:

#### A. If amending name, enter the new name of the limited liability company here:

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)

Jupiter, FL 33477

110 Front Street, Suite 300

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Jupiter, FL 33477

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered agent and/or the new registered office address here</u>:

		ر 	)
Name of New Registered Agent:		רד ו	1
Name of New Registered Agent.		<u> </u>	, <u> </u>
New Registered Office Address:	:	ري دي	
	Enter Florida street address		111
	Florida.,		
			Code
		(T)	J

#### 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 forther 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, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

## MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	Type of Action
MGR	James Brewster	110 Front Street, Suite 300	🗆 🖂 🖾
		Jupiter, FL 33477	🗆 Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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### E. Effective date, if other than the date of filing: ____02/09/2021___

(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated_	February 25	2021

James Brewster Signature of a member or authorized representative of a member

James Brewster

Typed or printed name of signee