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2022 MAR 18 AM 6: 43 SECRETARY OF STATE

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TO: Registration Division of C			
HiveQR SUBJECT:	LLC		
SUBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	spondence concerning this matter	to the following:	
	Jennifer A. Englert		
		Name of Person	
	The Orlando Law Group, I	PL	
	·	Firm/Company	
	12301 Lake Underhill Roa	d, Suite 213	
		Address	
	Orlando. FL 32828		
	<u></u>	City/State and Zip Code	
	jenglert@theorlandolawgro	up.com to be used for future annual report notifi	cation)
For further information	n concerning this matter, please e	•	canon,
Jennifer A. Englert		407 512-4394	
Name of Person		Area Code Daytime	Telephone Number
Enclosed is a check fo	r the following amount:		
■ \$25.00 Filing 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 Add Registration		Street Address: Registration Sect	tion
	Corporations	Division of Corp	

P.O. Box 6327

Tallahassee, FL 32314

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF FILED

HiveQR LLC		2022 HAR 18 AM 6: 43		
(Name of the Limit The Articles of Organization for this Limited Li	ed Liability Compa (A Florida Limited)	Ciability Company) SECRETARY OF STATE TALL AHASSEE, FL.		
The Articles of Organization for this Limited Li	iability Company	were filed on February 19, 2021 and assigned		
Florida document number L21000084506	·			
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	f the limited liab	ility company here:		
Hive Quick Response LLC				
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity 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)		940 Centre Circle, Suite 2004		
		Altamonte Springs, FL 32714		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		940 Centre Circle, Suite 2004		
		Altamonte Springs, FL 32714		
B. If amending the registered agent and/or ragent and/or the new registered office address		address on our records, <u>enter the name of the new registered</u>		
Name of New Registered Agent:	Jennifer A. Eng	elert		
New Registered Office Address:	New Registered Office Address: 12301 Lake Underhill Road, Suite 213 Finer Florida street address			

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.

Orlando

If Changing Pagistered Agent, Signature of New Registered Agent

DocuSigi Envelope ID: BADFA5CO-0F76-4BEC-A924-53A16C26B90A it amenuing Authorized rerson(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
MGR	MTE Holdings LLC	940 Centre Circle, Suite 2004	= Add
		Altamonte Springs. FL 32714	□ Remove
			Change
			□Add
			□Remove
			□Change
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Filing Fee: \$25.00