## L2100010909Z

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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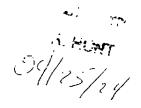




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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	04/25/2024			
Name:	Patrice Rush	_		
Reference	2339511			
	ne: CONGR	UITY HR III, LLC		
☐ Arti	icles of Incorporation/Authorizatio	n to Transact Business	<b>***</b>	
<b>✓</b> Am	endment			
Cha	ange of Agent	(s.) (2.)	ر ۲۰۱	
☐ Rei	instatement	SCHOOL STATE	5 AH	
Co	nversion	E.F.	¥ 7:5	
□ Ме	rger	E.	=:	
☐ Dis	solution/Withdrawal			
☐ Fict	titious Name			
Oth	ner			
Authorized				
Signature:	: Pull			

F: +852.2682.9790

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Já	anusHR II LLC			
( <u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears Limited Liability Company)	on our records.)	<u> </u>	
The Articles of Organization for this Limited Liability C	ompany were filed on	3/16/2021	nnd againe t	
Florida document number L21000109092		and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limi	ted liability company her	<u>e</u> :		
Congr	uity HR III LLC			
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the des	ignation "LLC" or the abb	reviation "L.L.C."	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDR.	ESS)		72.	
			•	
	-	72.	00 .	
Enter new mailing address, if applicable:		5.4	<u>।</u> -तःः	
(Mailing address MAY BE A POST OFFICE BOX)		in the	2 pmg	
		FIA	<del>!</del>	
		<u> </u>		
B. If amending the registered agent and/or registe registered agent and/or the new registered office address.	ered office address on o ess here:	our records, enter th	e name of the nev	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida	street address		
<del></del>		, Florida		
	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 Changing Registered Agent, Signature of New Registered Agent

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		
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			□ Remove		
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Note: If the d	te, if other than the date of ate is listed, the date must be spec- date inserted in this block doe ffective date on the Departme	tic and cann	not be prior to the applicab	1			ional) er filing.) Pu is date wil	ersuant to I not be	o 605.020 : listed a
e record si The 90th	pecifies a delayed effect day after the record is t	ive date iled.	, but not	an effect	ive time, a	t 12:01	a.m. on	the e	arlier d
ated	April 22	,	2024						
		•							
-	Signatur	of a memb	per or authoriz	zed represen	tative of a mer	nber			-
			Mike \	/iola					
		Tyne	ed or printed i						_

Page 3 of 3

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