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LAW OFFICE OF

MARK D. RASCH

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TELEPHONE (301) 547-6925 FACSIMILE (240) 209-5344

MARK D. RASCH, ESQ. MDRASCH@GMAIL.COM

MEMBER MARYLAND NEW YORK, AND MASSACHUSETTS BARS

March 17, 2023

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Change of Name Tellcyn, LLC to MyCyberHero, LLC

Dear Sir or Madam:

Enclosed for filing is an Amendment to the Articles of Organization of TellCyn, LLC changing the name to MyCyberHero, LLC. No other changes are applicable. Also find a check in the amount of \$25 for the filing fee.

Address any questions to me as counsel for the LLC.

Yours truly,

Mark D. Rasch, Esq.

Corporate Resolution for TellCyn, LLC Name Change

WHEREAS, the Board of Directors of TellCyn, LLC (the "Company") has determined that it is in

the best interest of the Company to change its name to "MyCyber Hero, LLC."

NOW, THEREFORE, BE IT RESOLVED, that the Board of Directors of the Company hereby

approves and authorizes the change of the Company's name from TellCyn, LLC to "MyCyber

Hero, LLC" effective immediately.

FURTHER RESOLVED, that the officers of the Company are hereby authorized and directed to

take all necessary actions to effectuate the name change, including but not limited to filing the

appropriate documents with the Florida Department of State. Mark Rasch, as external counsel is

authorized to file all such documents.

RESOLVED FURTHER, that all actions previously taken by the officers of the Company in

furtherance of the name change are hereby ratified, approved and confirmed.

The undersigned, being all of the Directors of the Company, do hereby consent to the above

resolution.

Dated: March 13, 2023

Cynthia Camacho, President

COVER LETTER

TO: Registration Se Division of Cor					
TELLCYN					
SUBJECT:	Name of Lin	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Cynthia Camacho				
		Name of Person			
	TellCyn, LLC		□ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
		Firm/Company			
	4779 Collins Avenue, Uni	t 2703			
		Address			
	Miami Beach, Florida 331	40			
		City/State and Zip Code			
	Cyn@mycyberhero.com	to be used for future annual report not	(Carriery)		
For further information of	concerning this matter, please c		meanon		
Cynthia Camacho		917 822-4067			
Name o	f Person	Area Code Daytim	ne Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy		
Mailing Addres		<u>Street Address:</u> Registration Se	ection		
Division of C			Division of Corporations		
P.O. Box 632		The Centre of 7			
Tallahassee,	rl 32314	2415 IN. MODITO	e Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TELLCYN, LLC	
(<u>Name of the Limited Liability Cor</u> (A Florida Limit	mpany as it now appears on our records.) ted Liability Company)
The Articles of Organization for this Limited Liability Comparing document number <u>L21000115273</u>	any were filed on March 10, 2021 and assigned
his amendment is submitted to amend the following:	
If amending name, enter the new name of the limited l	iability company here:
My Cyber Hero, LLC	
he new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the abbreviation "L.L.C."
inter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS	2
	73 F
	HAR I
nter new mailing address, if applicable:	2
Mailing address MAY BE A POST OFFICE BOX)	Some A CO
runng dagress 19711 DE 711 OFF OFF THE BOTT	mo œ
 If amending the registered agent and/or registered offi- gent and/or the new registered office address here: 	ce address on our records, <u>enter the name of the new regist</u>
Name of New Registered Agent:	
New Registered Office Address:	
TOTAL TOTAL CONTROL TRANSPORT	Enter Florida street address
	, 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 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
			□Add
			□Remove
			□Change
			□Add
			□Remove
		· · · · · · · · · · · · · · · · · · ·	□Change
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ام میشوم	ate, if other than the date of filing:	15, 2023	(antional)	
effective	date is listed, the date must be specific and cannot be	prior to date of filing or a	optional) more than 90 days after filing.) F	ursuant to 605.0207
	edate inserted in this block does not meet the ap effective date on the Department of State's reco		ng requirements, this date w	ill not be listed as
unicii 3	effective date on the Department of State 3 feet	11 43.		
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cora spe s filed.	cifies a delayed effective date, but not an effecti	ve time, at 12:01 a.m.	on the earner of: (b) The	90th day after the
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ed	M/L			
ed	Signature of a member or	nuthorized representativ	e of a member	