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Office Use Only





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WALLEY CORROLLING

COVER LETTER

TO: Registration Se , Division of Cor			
	Prolutions LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
	ondence concerning this matter	<u>-</u>	
	Kelsey		
	·	Name of Person	
	ZenBusiness Inc		
		Firm/Company	22
	5511 Parkerest Dr., STE 1	03	AUG ::
		Address	——————————————————————————————————————
	Austin, TX 78731		22 AUG 15 PH 12: 56
	fulfillment@zenbusiness.co	City/State and Zip Code	
		on to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c		
Kelsey c/o ZenBusiness	Inc	844 493-6249	
Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
臺 \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration S		<u>Street Address:</u> Registration Se	ction
Division of C	Corporations	Division of Cor	porations
P.O. Box 632 Tallahassee, I		The Centre of T 2415 N. Monro	lallahassee e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

True Value Prolutions LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on <u>06/08/2021</u>	_ and assigned
Florida document number 1.21000161304		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:	2128 ashby st Unit 502 Dallas, TX 75204	~
Principal office address MUST BE A STREET ADDRESS)		7 S A
		S 25
		<u> </u>
nter new mailing address, if applicable:	2128 ashby st Unit 502 Dallas, TX 75204	PHIP: 5
Mailing address MAY BE A POST OFFICE BOX)		
		7
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, enter the name o	7
Name of New Registered Agent:		
New Registered Office Address:	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 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
AMBR	Thomas Mccants	2128 ashby st 502 Dallas, TX 75204	🗀 Add
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ective date, if other than the	e date of filin	ıg:			(optional)		
effective date is listed, the date mi e: If the date inserted in this b	ast be specific an block does not i	d cannot be prior t meet the applica	o date of filing o ble statutory fi	r more than 90 da ling requiremen	iys after filing.) ats, this date v	Pursuant to- vill not be	605.020 listed a
ument's effective date on the I	Department of S	State's records.					
cord specifies a delayed effecti tiled.	ve date, but no	t an effective tir	ie. at 12:01 a.r	n, on the earlie	rof:(b) The	90th day a	itter the
ed August 8		. 2022	_ ·				
/s/Thom	as Mcc	ants					