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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 : (561)694-8107 Phone Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TCHE TECH, LLC

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Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

M. SOLOMON

FEB 1 3 2024

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TCHE TECH. LLC		
(<u>Name of the Limited Llability Compan</u> (A Florida Limited Li	y as it now appears on our records ability Company)	<u></u>)
The Articles of Organization for this Limited Liability Company v	were filed on	and assigned
Florida document number L21000222259		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
		202
The new name must be distinguishable and contain the words "Limited Liabilit	ty Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		· E
(Principal office address MUST BE A STREET ADDRESS)		့ ယ န
		PH 12:1
		2:1
Enter new mailing address, if applicable:		र्वति 😈
(Mailing address MAY BE A POST OFFICE BOX)		
		- '
B. If amending the registered agent and/or registered office adapted and/or the new registered office address here:	ddress on our records, <u>enter (</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	·
		rida
	Сиу	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
MGR	Bruna De Castro Mucelin	1550 MADRUGA AVE STE 150	DAdd
		CORAL GABLES, FL 33146	■Remove
			☐ Change
			□Add
			□Remove
			2024 FE8
			
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		PH 12:
		<u></u>
Note: If the date inserted in this blo	be specific and cannot be prior to date of filing or more than ck does not meet the applicable statutory filing requirement of State's records.	rements, this date will not be listed as the
he record specifies a delayed effective ord is filed.	date, but not an effective time, at 12:01 a.m. on the e	earlier of: (b) The 90th day after the
Dated February 13th	. 2024	
	/s/ Tymberlyn Teefey	
	ignature of a member or authorized representative of a me	mber
Tymberlyn Teefey, Attor	ney-in-Fact	
	Typed or printed name of signee	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)