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21 SE# 27 PH I2: 11

COVER LETTER

TO:	Registration Sec Division of Corp			
01 ID 11		RIS CONSULTING & SOFT	WARE SOLUTIONS L.L.C.	
Name of Limited Liability Company				
The en	closed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspoi	ndence concerning this matter	to the following:	
		LOVETTE DOBSON		
		77	Name of Person	
			Firm/Company	
		17350 STATE HWY 249,	#220	
			Address	
		HOUSTON, TX, 77064		
			City/State and Zip Code	
		EFILE1234@INCFILE.CO		<u>. </u>
		E-mail address: (to be used for future annual report not	ification)
For fur	ther information co	oncerning this matter, please ca	all:	
LOVE	TTE DOBSON		888 462-3453	
	Name of	Person		ne Telephone Number
Enclose	ed is a check for th	e following amount:		
≡ \$2.	5.00 Filing Fec	☐ \$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 Address:
Registration Section
Division of Corporations

P.O. Box 6327

Street Address:
Registration Section
Division of Corporations

The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GAW-MORRIS CONSULTING & SOFTWARE SOLUTIONS L.L 27 SEP 27 PH 12: 11

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on L21000403500 and assigned

Florida document number 09/13/2021

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "I imited I ighility Company" the designation "I I C" or the abbreviation "I I C"

A. If amending name, enter the new name of the limited liability company here:

Enter new principal offices address, if applicable: <u>Principal office address MUST BE A STREET ADDRESS</u>)	1235 Providence Blvd Ste R #503, Deltona FL 32725
Enter new mailing address, if applicable:	1235 Providence Blvd Ste R #503, Deltona FL 32725

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flo	orida

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 = M	lanager			
	Authorized Member	Address 27 PH12: 11		
<u>Title</u>	<u>Name</u>	Addless	Type of Action	
AMBR	Harry Morris	1235 Providence Blvd Ste R #503	□ Add	
		Deltona FL 32725	□Remove	
			Change	
			□Remove	
			□Change	
			□Add	
			□ Remove	
			Change	
			□Add	
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Effective date, if other than the date of fili If an effective date is listed, the date must be specific a Note: If the date inserted in this block does not document's effective date on the Department of	and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) at meet the applicable statutory filing requirements, this date will not be listed as the
e record specifies a delayed effective date, but nord is filed.	tot an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated SEPTEMBER, 23	2021
Hany Signature of :	Movis a member or authorized representative of a member
I Signature of :	a member or authorized representative of a member