L21000414617

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2022 FEB 22 AM 9: 09
SECRETARY OF STATE

A. BUTLER MAR 2 - 2022

COVER LETTER

TO: Registration Se Division of Cor				
SIGNFLLL	C		• •	
SUBJECT:	Name of Lim	hed Liability Company .		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Jeffrey Muchnick			
		Name of Person		
	General Counsel		•	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company		
	2883 EXECUTIVE PARK DRIVE, St 191			
		Address		
	Weston, Fl 33331			
		City/State and Zip Code		
	jeff@signfi.io	to be used for future annual report no	(Huatian)	
For further information of	concerning this matter, please c		uncanon)	
Jeff Muchnick		954 3856363 at () _		
Name of Person		Area Code Dayti	me Telephone Number	
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy todditional copy is evel to di-	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy taudalosad copy is enviroada.	
Mailing Address:		Street Address: Registration S	ection	
Registration Section Division of Corporations		Division of Corporations		
P.O. Box 6327		The Centre of 2415 N. Moor		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

If Changing Registered Agent, Signature of New Registered Agent

SIGNELLIC	Liability Company as it now appears on our records. AM 9: 09
(<u>Name of the Limited</u> (A The Articles of Organization for this Limited Liab	Liability Company as it now appears on our records? AM 9: 09 Florida Limited Liability Company) SECRETARY OF STATE oility Company were filed on (19/20/2021 LAHASSEE, F1 and assigned)
Florida document number 1.21000414617	
This amendment is submitted to amend the follow	ving:
A. If amending name, enter the new name of t	he limited liability company here:
IP Signfi LLC	
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applical	ole:
(Principal office address MUST BE A STREET	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE B	OV)
[Mannaganawayara Managana Mana	
	gistered 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:	
	Emer Floriga street address
	Florida
	City Zip Code
New Registered Agent's Signature, if changing Re	egistered Agent:
provisions of all statutes relative to the proper accept the obligations of my position as regist	agent and agree to act in this capacity. I further agree to comply with the rand complete performance of my duties, and I am familiar with and rered agent as provided for in Chapter 605, F.S. Or, if this document is egistered office address. I hereby confirm that the limited liability hange.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person-being added by 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
			□Add
			☐Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Remove
			☐Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: 01/01/2025. ____ (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the record is filed. Dated _____ Signature of a subject or authorized representative of a member Muchnist

William Feet \$25.00