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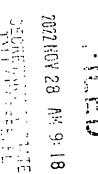
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COVER LETTER

,	gistration Se vision of Cor			
SUBJECT:	MATHPRE	P. LLC		
SUBJECT		Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please returi	n all correspo	ndence concerning this matter	to the following:	
		RISHI B. JETHWA		~1
		MATHPREP, LLC	Name of Person	2022 NOV 28 EM 9: 18 SECRETAL VILLES IATE FALTE
		250 CELECTIAL WAY	Firm/Company	28
		250 CELESTIAL WAY	Address	- 18 - 18 - 18
		WINTER SPRINGS, FL 3	2708	
		RISHIJETHWA@GMAIL.		
For further i	information c	E-mail address: (oncerning this matter, please c	to be used for future annual report notification)	
RISHLB. JE	ETHWA		214 560-8761	
	Name o	l Person	Area Code Daytime Telephone	Number
Enclosed is	a check for th	ne following amount:		
■ \$25.00 ;	Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) C	60.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
Re Di P.0	niling Addres Egistration S vision of C O. Box 632 Ilahassee, F	Section orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahasse 2415 N. Monroe Street, S Tallahassee, FL 32303	e

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 9/29/2021 Florida document number L21000428775 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbrevia Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of agent and/or the new registered office address here:	
Chis amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbrevial content new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered office address on our records, enter the name of	
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbrevial containing address, if applicable: Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of	and assigned
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. If amending the registered agent and/or registered office address on our records, enter the name of	9.
. If amending the registered agent and/or registered office address on our records, enter the name of):
. If amending the registered agent and/or registered office address on our records, <u>enter the name of</u>	
gent and/or the new registered office address nere:	he new registe
Name of New Registered Agent:	
Name of New Registered Agent.	
New Registered Office Address: Enter Florida street address	
Florida	n 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>	Name	Address	Type of Action
MBR	AHMED ANOUAR	15007 MONTESINO DR.	
		ORLANDO, FL 32828	□Remove
			Change
			□Add
			Remove 77.110 VC Change
			Add Remove
			□ Change
			□Add
			□Remove
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Changé

AHMED ANOUAR IS ADDE	D AS MEMBER, BUT WILL HAVE	E NO AUTHORITY TO EN	TER INTO ANY
TRANSACTION ON BEHALI	F OF OR OTHERWISE ACT FOR C	OR BIND THE COMPANY	
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			022 HOV
			8
			<u>- 10 ₹</u>
			Lit
	11-21-2022		
ective date, if other than the d effective date is listed, the date must b	ate of filing:	ling or more than 90 days after	filing.) Pursuant to 605.0
te: If the date inserted in this bloc nument's effective date on the Dep	ck does not meet the applicable statute sartment of State's records.	ory filing requirements, this	date will not be listed
cord specifies a delayed effective of sfled.	date, but not an effective time, at 12:0	OI a.m. on the earlier of: (b)	The 90th day after t
NOVEMBER 16	2022		
	$\overline{\bigcirc}$		

Typed or printed name of signee