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NAME: REVOLENT CAPITAL SOLUTIONS FUND NINE, LLC

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TO: Registration Section

Division of Corporations

Tallahassee, FL 32314

	NT CAPITAL SOLUTIONS FU	JND NINE, LLC	
SUBJECT:	Name of Lim	ited Liability Company	·
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Denise Annunciata		
		Name of Person	
	Velawcity		
		Firm/Company	- 11
	29 Kathryn Drive		
		Address	
	Ashland, MA 01721		
		City/State and Zip Code	
	denise@velawcityinc.com	to be used for future annual report no	ATAY and the
For further information of	encerning this matter, please c		ouncation)
Denise Annunciata		508 277-1966	
Name o	of Person	at () 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	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration S	
Division of C	Corporations	Division of Co	•
P.O. Box 633	<i>21</i>	The Centre of	i ananassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

DocuSign Envelope ID: 5237A585-AD8D-42E7-8459-018FE9D63854 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



REVOLENT CA	PITAL SOLUTIONS FUN	ID NINE, LL 2024 H	AR I I AM 10: 32
(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appears imited Liability Company)	on our records.)	HASSEE FLORIDA
The Articles of Organization for this Limited Liability Co	mpany were filed onJa	nuary 3, 2022	and assigned
Florida document number L22000001144	<u>-</u> •		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company her	<u>re</u> :	
no change			
The new name must be distinguishable and contain the words "Limite	ed Liability Company." the de-	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	no change		
(Principal office address MUST BE A STREET ADDRE	<u> </u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our red	cords, <u>enter the n</u> a	ame of the new register
Name of New Registered Agent: no change	āc.		
New Registered Office Address:	Enter Floric	la street address	
		Florido	
	City	, Florida _.	Zip Code

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.

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II 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	Josh Kuder	Josh Kuder	= Adđ
		217 N. Howard Avenue. Ste. 200	□Remove
		Tampa, FL 33606	[Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
		· · · · · · · · · · · · · · · · · · ·	
			□Remove
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				ASSEE A	- 1
				FOR SH	· _
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Effective date, if other than the (If an effective date is listed, the date me Note: If the date inserted in this bedocument's effective date on the I	lock does not meet the ap-	plicable statutory filing r	(optiona than 90 days after filin equirements, this day	l) g.) Pursuant to 605 e will not be list	5.0207 ted as (
the record specifies a delayed effecti ord is filed.			the earlier of: (b)	The 90th day afte	er the

Filing Fee: \$25.00

Signature of a member or authorized representative of a member

Typed or printed name of signee

Bryson Raver, Manager