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2022 APR -5 AM 7: 15 SECRETARY OF STATE TALLAHASSEE, FL

U Shamions APR 2 0 2022

COVER LETTER

Registration Section

TO:

Div	ision of Cor	porations				
	CYBER-DA					
SUBJECT:			ited Liability Company			
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		NORDENE DIXON				
		<u> </u>	Name of Person			
		NORKWIN, PLLC				
			Firm/Company			
	19005 MAJESTIC STREET					
			Address			
		ORLANDO, FL 32833				
		····	City/State and Zip Code			
		INFO@NORKWIN.COM	to be used for future annual report no	ntification)		
For further in	nformation c	oncerning this matter, please c				
NORDENE	DIXON		407 810-6604			
	Name o	f Person	at () Area Code Dayti	ime Telephone Number		
Enclosed is a	a check for th	ne following amount:				
≡ \$25.00 F	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)		
Re	iling Addres	Section	Street Address: Registration S			
Division of Corporations P.O. Box 6327				Division of Corporations The Centre of Tallahassee		
Tal	llahassee, I	FL 32314	2415 N. Moni	roe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION 2022 APR -5 AM 7: 15

FILED

CYBER-DATA LLC

SECRETARY OF STATE
TALLAHASSEE, FL

(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 Co	mpany were filed on 03/15/2022	and assigned
Florida document number L22000129003	<u>.</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(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 agent and/or the new registered office address here:	office address on our records, enter th	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	, Flor	ida Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and conaccept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	mplete performance of my duties, and ent as provided for in Chapter 605, F.	I am familiar with and S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

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
MGR	SEAN THORPE	12001 RESEARCH PKWY, ORLANDO, FL 32826	= Add
			□Remove
			Change
MGR	DEBBIE THORPE	12001 RESEARCH PKWY, ORLANDO, FL 32826	🗎 Add
			□Remove
			DChange
			□Add
			🗆 Remove
			□Change
			🗆 Add
			□Remove
			Change
			□Add
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			□Change
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			Change

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		 :		
				
ctive date, if other than the effective date is listed, the date must list the date inserted in this barment's effective date on the I	ist be specific and cannot be pri flock does not meet the appl	or to date of filing or more icable statutory filing re	(optional) than 90 days after filing.) Pursua equirements, this date will no	int to 605.020 It be listed a
ord specifies a delayed effecti filed.	ve date, but not an effective	time, at 12:01 a.m. on t	he earlier of: (b) The 90th o	day after th
APRIL 1	2022	<u> </u>		
- 	<u> </u>			
y home	Signature of a member or au			

Filing Fee: \$25.00