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COVER LETTER

TO: Registration S Division of Co				
	ebster LLC			
SUBJECT: Name of Limited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspondence	ondence concerning this matter	to the following:		
	Fabrizio Lengua			
		Name of Person	1/246414	
	ZenBusiness INC.			
		Firm/Company		
	5511 Parkerest Dr. Suite 1	03		
		Address		
	Austin, TX 78731			
		City/State and Zip Code	······································	
	fulfillment@zenbusiness.co			
	E-mail address: (to be used for future annual report noti	fication)	
For further information of	concerning this matter, please c	all:		
Fabrizio Lengua		512 237-7349		
Name (of Person		e 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		Street Address: Registration Sec	ction	
Division of Corporations		Division of Cor	Division of Corporations	
P.O. Box 6327 The Centre of Tallahassee				
Tallahassee.	FL 32314	2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cole & Webster LLC

(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 2022-04-06 and Florida document number 1.22000166401

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 abbreviation "LLC"

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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	
	Florida	

City

New Registered Agent's Signature, if changing Registered Agent:

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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 Changing Registered Agent, Signature of New Registered Agent

Zip Code

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>	<u>Name</u>	Address	Type of Action
		-	□Add
			□Remove
			□ Change
			□Add
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Page 2 of 3

		2022 MAY
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		<u>.</u>
		
 		
Note: If the date inserted in th	the date of filing:	(optional) n 90 days after filing.) Pursuant to 605.0207 irements, this date will not be listed as
he record specifies a dela The 90th day after the	yed effective date, but not an effective time, a record is filed.	at 12:01 a.m. on the earlier of
Dated	. 2022	
	/s/ Bharati Ranganathan	
	Signature of a member or authorized representative of a me	ember
Bharati Ranganatha	1	
	Typed or printed name of signee	

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Filing Fee: \$25.00