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COVER LETTER

Tallahassee, FL 32314

то:	Registration S Division of Co						
SUD IE	Paxtech T	Paxtech Technologies LLC					
SUBJECT:Name of Limited Liability Company							
The encl	osed Articles o	f Amendment and fee(s) are sub	omitted for filing.				
Please re	eturn all corresp	condence concerning this matter	to the following:				
		Jacqueline Quiroga					
			Name of Person				
		ZenBusiness INC					
			Firm/Company				
		5511 Parkerest Drive STE	103				
			Address				
		Austin, Texas, 78731					
			City/State and Zip Code				
		fulfillment@zenbusiness.co	om to be used for future annual report no	(iflection)			
For furth	er information	concerning this matter, please c					
Jacqueli	ne Quiroga c/o	ZenBusiness INC	844 493-6249				
	Name	of Person	at ()	ne Telephone Number			
Enclosed	l is a check for t	the 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)			
	Mailing Addre		<u>Street Address:</u> Registration Se	ection			
	Division of O P.O. Box 63	Corporations	Division of Co The Centre of	rporations			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 MAY 31 PM 12: 31

Paxtech Technologies 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 05/04/2022 _____ and assigned Florida document number 1.22000211417 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." 12724 Gran Bay Parkway West Enter new principal offices address, if applicable: Suite 410 - #0542 (Principal office address MUST BE A STREET ADDRESS) Jacksonville, FL 32258 12724 Gran Bay Parkway West Enter new mailing address, if applicable: Suite 410 - #0542 (Mailing address MAY BE A POST OFFICE BOX) Jacksonville, FL 32258 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:

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>	<u>Name</u>	Address	Type of Action
AMBR	Srinivas Rao Angalkudru	12724 Gran Bay Parkway West	
		Suite 410 - #0542	
		Jacksonville, FL 32258	_
AMBR	Roma Rao Angalkudru	12724 Gran Bay Parkway West	
		Suite 410 - #0542	□Remove
		Jacksonville, Fl. 32258	
<u></u>			□Add
			□Remove
			□Change
			□Add
			□Remove
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Effective date, if other than the difference of the date is listed, the date must Note: If the date inserted in this blood document's effective date on the Department.	be specific and cannot be prior to date of fek does not meet the applicable statut	ory filing requirements, this date	2.) Pursuant to 605,0207 (3
ne record specifies a delayed effective ord is filed.	date, but not an effective time, at 12:	01 a.m. on the earlier of: (b) T	he 90th day after the
Dated May 25th	2022		
/s/ Srinivas I	Rao Angalkudru		
	ignature of a member or authorized repre	sentative of a member	***********
	The state of a manner of authorities reprise		