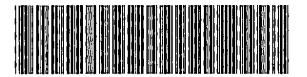
# [13900031P2J]

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SECRETARY OF STATE
TALLAHASSEE, FI

## **COVER LETTER**

Registration Se Division of Cor			- <del> </del>
ROADRUN	INAZ COMMUNICATION L	LC	
CT:	Name of Lin	ited Liability Company	<del></del>
closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
return all correspo	ndence concerning this matter	to the following:	
	SANJA J WITTINGHAM		
		Name of Person	
		Firm/Company	
	5875 FOLKSTONE LANE	5	
		Address	
	ORLANDO, FL 32822		
		City/State and Zip Code	
	mynotaryofcentralfloridal@		
	E-mail address: (	to be used for future annual report notif	ication)
or further information c	oncerning this matter, please c	all:	
SANJA J WITTINGHAY	М	631 918-0144 at ( )	
Name o	f Person	Area Code Daytimo	e Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		(additional copy is chemister)	

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limi		iny as it now appears or Liability Company)	our records.)	<del></del>
ticles of Organization for this Limited L document number L22000216571	iability Company	were filed on 05/09/	2022	and assigned
mendment is submitted to amend the following	lowing:			
amending name, enter the new name of	of the limited liab	ility company here:		
w name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desig	nation "LLC" or the al	obreviation "L.L.C."
r new principal offices address, if appli	cable:	N/A		
cipal office address MUST BE A STRE		N/A		
	<del></del>	N/A		
		N/A		
r new mailing address, if applicable:	( b 232)	N/A		<u> </u>
ing address MAY BE A POST OFFICE	<u>ΒΟλ)</u>	N/A		
f amending the registered agent and/or t and/or the new registered office addre	registered office ess here:	address on our reco	rds, <u>enter the nan</u>	se of the new register
Name of New Registered Agent:	SANJA J WITTINGHAM		(SSP)	
New Registered Office Address:	5875 FOLKST		street address	STATI
	ORLANDO	Enter r tortaa	, Florida <sup>32</sup>	822
		City		Zip Code

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

DA CONTRIBILAZ COMA (UNICATIONELLO)

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.

San ja Wittingham
If Changing Registered Agent, Signature of New Registered Agent

ding Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added eved from our records:

· Manager

= Authorized Member

	<u>Name</u>	<u>Address</u>	Type of Action
	ROXANNE P HOQUEE WITTING	5875 FOLKSTONE LANE	□Add
		ORLANDO	Remove
		F1. 32822	Change
	SANJA J WITTINGHAM	5875 FOLKSTONE LANE	□Add
		ORLANDO	
		FL 32822	
BR	SANJA J WITTINGHAM	5875 FOLKSTONE LANE	-
		ORLANDO	_
		FL 32822	FIG
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			☐ Change
			□Add
			Remove
			□Change
			□Remove
			□Change

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ective date, if other than the effective date is listed, the date must te: If the date inserted in this blooment's effective date on the Do	ock does not meet the applicabl	(option date of filing or more than 90 days after fi e statutory filing requirements, this c	al) ling.) Pursuant to 605.0207 (3)(late will not be listed as the
cord specifies a delayed effective s filed.	date, but not an effective time	, at 12:01 a.m. on the earlier of: (b)	The 90th day after the
ed October 11th	, 2022		
Sanje	1 Wittingham Signature of a member or authorize	red representative of a member	·
SANJA J WITTINGHA			
	Typed or printed i	name of signee	<u> </u>

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ROADRUNNAZ COMMUNICA				
(Name of the Lim	ited Liability Compa (A Florida Limited	inv as it now appears o Liability Company)	n our records.)	
cles of Organization for this Limited I document number 1.22000216571	iability Company	were filed on 05/09	/2022	and assigned
iendment is submitted to amend the fol	lowing:			
mending name, enter the new name	of the limited liab	ility company here	•	
		<del>,_,</del> _,		
name must be distinguishable and contain the	words "Limited Liabi		gnation "LLC" or	the abbreviation "L.L.C."
new principal offices address, if applicable:  ipal office address MUST BE A STREET ADDRESS)		N/A		<del></del>
		N/A		
		N/A		
new mailing address, if applicable:		N/A		·
ling address MAY BE A POST OFFICE	` <i>BOX</i> )	N/A		
		N/A		
amending the registered agent and/or tand/or the new registered office address.			ords, <u>enter the</u>	name of the new registe
Name of New Registered Agent:				
New Registered Office Address:	5875 FOLKST		street address	
	ORLANDO	Emer Pioriaa		32822
	ORLANDO	City	, Florid	a Zip Code

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

sereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and scept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is zing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability ompany has been notified in writing of this change.

San a Wittingham
If Changing Begistered Agent, Signature of New Registered Agent

ding Authorized Person(s) authorized to manage, enter the title, name, and address of each person\_being added ved from our records:

### Manager

## = Authorized Member

Name	Address	Type of Action
ROXANNE P HOQUEE WITTING	5875 FOLKSTONE LANE	□Add
	ORLANDO	
	FL 32822	
SANJA J WITTINGHAM	5875 FOLKSTONE LANE	7
	ORLANDO	■Remove
	FL 32822	□Change
SANJA J WITTINGHAM	5875 FOLKSTONE LANE	
	ORLANDO	☐Remove
	FL 32822	□Change
		□Remove
		□Change
		□Add
		□Change
		□Add
		□Remove
		□Change

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		_	·
ive date lif other than the	date of filing:	ſſ	ontional)
ective date is listed, the date must If the date inserted in this blo ent's effective date on the De	ck does not meet the applicable	late of filing or more than 90 days as a statutory filing requirements,	p <b>tional)</b> after filing.) Pursuant to 605.0207 (3)( this date will not be listed as the
d specifies a delayed effective led.	date, but not an effective time.	, at 12:01 a.m. on the earlier o	f: (b) The 90th day after the
October 11th	2022		
_			
Danje	Wittingham Signature of a member or authorize	ed representative of a member	·
		•	
SANJA I WITTINGHAY			
	Typed or printed n	ame of signee	