7/27/22, 11:58 AM

**Division of Corporations** 

## Florida Department of State Division of Corporation

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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JUL 27 2022

To:

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TO: Registration Se Division of Cor			
	GN SOURCE LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ondence concerning this matter t	to the following:	
	Cheyenne Moseley		
		Name of Person	
	Legalzoom.com, Inc.		
		Firm/Company	
	101 N Brand Blvd 11th Fl		
		Address	
	Glendale, CA 91203		
	jdedesignsourcelle@outlook	City/State and Zip Code	
	* *	o be used for future annual report not	dication)
For further information of	concerning this matter, please ca	dk:	
Cheyenne Moseley		800 773-0888 at ()	
Name o	of Person	Area Code Daytim	te Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	S30.00 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)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

To:

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

(Name of the Limited Liability Compa- (A Florida Limited I	ny as it now appears on our records.) Jability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.22000297362	were filed on <u>07/01/2022</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	500 Bayview Dr., 827	
(Principal office address MUST BE A STREET ADDRESS)	Sunny Isles Beach, FL 33160	
	500 Bayview Dr., 827	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	Sunny Isles Beach, FL 33160	
	<u> </u>	
	ffice address on our records, enter	the name of the
B. If amending the registered agent and/or registered of		
		<b>202</b> :
registered agent and/or the new registered office address her		2022 JU 32002 7411.A
registered agent and/or the new registered office address here  Name of New Registered Agent:		2022 JUL 2 SEORE LAB
registered agent and/or the new registered office address her		SECRETARY OF TALLAHASSEE
registered agent and/or the new registered office address here  Name of New Registered Agent:	e: Enter Florida street address	SECRETARY OF STALLAHASSEE, FL
registered agent and/or the new registered office address here  Name of New Registered Agent:	g:	SEORE LARY OF TALL ANASSEE,

If Changing Registered Agent, Signature of New Registered Agent

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.

To:	Page:	5ο

2022-07-27 09:59:50 PDT

LegalZoom.com, Inc.

\_\_ Change

From: Sylvia Paull

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 Type of Action Title Name Address BALDWIN, TERRAH AMBR \_D Add \_\_\_\_ 🔲 Remove 500 Bayview Dr., 827 Sunny Isles Beach, FL 33160 \_\_\_\_ Remove ☐ Change \_□ Add ☐ Remove ☐ Change \_\_\_\_ □ Remove \_\_\_\_\_ Remove \_\_\_\_\_ Change DbA □ \_\_\_\_\_ Remove

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