10/27/22, 7:42 AM

Division of Corporations

Florida Department of State

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MORNINGSIDE ANALYTICS LLC

Certificate of Status	0
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OCT 28 2022 K. Brumbley

TO:		istration Sec ision of Corp			. 8	:
our ir		MORNING	SIDE ANALYTICS LLC		•	
SUBJE	.C1:		Name of Lim	ited Liability Company		
The en	closed	Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please	return	all correspor	idence concerning this matter	to the following:		
			Cheyenne Moseley			
				Name of Person		
			Legalzoom.com, Inc.			
				Firm/Company		
			101 N Brand Blvd 11th Fl			
				Address		
			Glendale, CA 91203			
			carolina.kallaus@gmail.cor	City/State and Zip Code		
			-	to be used for future annual report	notification)	
For fur	ther in	uformation co	oncerning this matter, please c	all:		
Cheye	nne M	loseley		800 773-088	18	
	-	Name of	Person		sytime Telephone Number	
Enclos	ed is a	s check for th	e following amount:			
□ \$2	5.00 F	iting Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &

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

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ARTICLES OF ORGANIZATION OF

MORNINGSIDE ANALYTICS LLC				
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000332350</u> .	were filed on <u>07/27/2022</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 Liabi	lity Company," the designation "LLC" or the	abbreviation "L.l.C."		
Enter new principal offices address, if applicable:	6216 Flash Ln.			
(Principal office address MUST BE A STREET ADDRESS)	Crestview, Florida 32536			
Enter new mailing address, if applicable:	2260 S Ferdon Blvd., #363			
(Mailing address MAY BE A POST OFFICE BOX)	Crestview, Florida 32536			
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address ber Name of New Registered Agent: New Registered Office Address:		er the name of the new APPROVE		
	, Florida	73 F 5		
	City	Lip Gae		

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 Changing Registered Agent, Signature of New Registered Agent

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Carolina Kallaus		Add
			☐ Remove
		6216 Flash Ln. Crestview, Florida 32536	■ Change
			□ Add
			☐ Remove
			☐ Change
			Add
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(If a <u>No</u>	n effectiv <u>ete:</u> If th	ne date inserted in this b	ist be specific and cannot be prior to date of fili slock does not meet the applicable statutor Department of State's records.	ng or more than 90 days after filing) Purs	auant to 605.0207 (3)(b) not be listed as the
if tha	rocos	t angaifíge a dolasta	d effective date, but not an effec	tive time at 12:01 a.m. on t	he earlier of:
(b) 1	The 90	th day after the re-	cord is filed.	are ame, at 12.01 ami on t	ne carner on
Đa	ted	18 Octobe	r , 8022		
		 	Alexa	-	
			Signature of a member or authorized repress	entative of a member	
		Carolina Kallaus			
			Typed or printed name of si	unce	

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