## 122000521825

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Saciness Emily Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400429064424

05/02/24--01017--007 \*\*25.00

6. HUMT 5 -/--//:/

## **COVER LETTER**

TO: Registration Section

Division of Car	porations				
2A FORW.	ARD, LLC				
SUBJECT: Name of Limited Liability Company					
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	KAUSTUBH NADKARN	п			
	<del></del>	Name of Person			
	NADKARNI LAW PLLC				
		Firm/Company	<del></del>		
	1900 N. BAYSHORE DR	IVE, UNIT 1A, SUITE 140			
		Address			
	MIAMI, FL 33132				
		City/State and Zip Code			
	IP@NADKARNILAW.CO				
	E-mail address: (	to be used for future annual report not	ification)		
For further information c	oncerning this matter, please c	all:			
KAUSTUBH NADKARNI		786 300 1227			
Name of Person		Area Code Daytin	ne Telephone Number		
Enclosed is a check for the	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)		
Mailing Addres		Street Address:			
Registration Section Division of Corporations		Registration Se Division of Co			
P.O. Box 632	.7	The Centre of T			
Tallahassee, l	FL 32314	2415 N. Monro	e Street, Suite 810		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2A FORWARD, LLC					
(Name of the Lim	ited Liability Compa (A Florida Limited I	iny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited I Florida document number L22000521825	Liability Company	were filed on 12/13/2022	and assigned		
This amendment is submitted to amend the fol	lowing:				
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	lity Company," the designation "LLC" or the	abbreviation "L.L.C."		
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		C/O NADKARNI LAW PLLC			
		1900 N. BAYSHORE DRIVE, UNIT 1A, SUITE 140			
		MIAMI, FL 33132			
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)		C/O NADKARNI LAW PLLC  1900 N. BAYSHORE DRIVE, UNIT 1A, SUITE 140			
manng auaress mai De at tolly of the	<u> BUX</u>	MIAMI, FL 33132			
B. If amending the registered agent and/or agent and/or the new registered office address:  Name of New Registered Agent:  New Registered Office Address:	NADKARNI L		me of the new regi		
Negistered Office Address.	<del></del>	Enter Florida street address			
	MIAMI	, Florida <sup>3</sup>	. =		
		City	Zip Code		

## 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

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

	Authorized Member		<b></b>
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Add
			□Remove
		- <del></del>	
			□ Add
			□Remove
			□Сhаπge
			□Add
			□Remove
			□ Add
			□Remove
			☐ Change
			□ Add
			□Remove
			□ Change
			□Add
			□Remove
			[] Change

	<del></del>		<u> </u>				
	<del></del>			<del></del>	· <del></del> · · ·		
			·		<del> </del>		<b></b> -
			•		· · · · · ·		
						· ·	
						,	
_		<del></del>					<del></del>
					···-		
Effective	date, if other than the o	date of filing:			(ор	tional)	
Note: If	date, if other than the ever date is listed, the date must the date inserted in this bloes affective date on the De	ck does not me	et the applicat	date of filing or mole statutory filin	ore than 90 days af g requirements, t	ter filing.) Pursuant to his date will not be	605.0207 listed as
e record s	occifies a delayed effective	date, but not a	n effective tim	e, at 12:01 a.m.	on the earlier of:	(b) The 90th day s	after the
id is inca							
	ril 24		2024				
Dated A <sub>l</sub>				•			
Dated A		*					
Dated A		Gonstaire of a me	ember or author	zed representative	of a member		-

Filing Fee: \$25.00