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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : JFS CONSULTING SERVICES LLC

Account Number : 120220000092 Phone : (786)440-5553 Fax Number : (786)279-5272

***Ente	r the	email	address	for	this	business	entity	to	be	used	for	future
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGNA TIGER GLOBAL SOLUTION LLC

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COVER LETTER

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Curica	Tiger Glob	al Solution LLC	4	
SUBJECT	•	Name of Lim	ited Liability Company	
The enclos	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Picase retu	rn all correspo	ondence concerning this matter	to the following:	
		Jorge Schneider		
			Name of Person	**************************************
		JFS Consulting Services		
			Firm/Company	
		2627 NE 203rd Ste 218		
			Address	
		Aventura, FL 33180		
			City/State and Zip Code	
		Pschneider@jfsbizup.com E-mail address: ()	to be used for future annual report notif	fication)
For further	information c	oncerning this matter, please ca		
Jorge Schi	neider		786 4405553 at ()	
	Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is	s a check for th	ne following amount:		
€ \$25.00) Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Fiting Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed
<u>»</u>	lailing Addres	5 <u>5:</u>	Street Address:	st ion

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

Tiger Global Solution 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 01/10/2023 and assigned Florida document number ______1.23000011871 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." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 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>	Name	Address	Type of Action
MGR	Lucas Radosinsky	501 N. RIVERSIDE DR. APT 902	■Add
		POMPANO BEACH, FL 33062	
			☐ Change
			□Add
			□Remove
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Note: If the locument's record specified.	ril 4		_, <u>2023</u>	_ ·			r the
Note: If the locument's record specified.	·		_, <u>2023</u>	_ ·	n the earlier of: (b)		r the

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