## L23000014921

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

Office Use Only



600451148856

05/18/25--01831--009 \*\*S5.90

2025 MAY 19 AM 11: 4:

200 7-11-70

## **COVER LETTER**

THEPIEXP				
SUBJECT:	Name of Limited	Liability Company		
The enclosed Articles of	Amendment and fee(s) are submitt	red for filing.		
Please return all correspo	ndence concerning this matter to the	he following:		
	Robert Bush			
		Name of Person		
	THEPIEXPERT LLC			
		Firm/Company		
	7915 Jubilee Park Blvd, Apt 2	127		
		Address		
	Orlando, FL 32822			,
		ity/State and Zip Code	<u></u>	,
	robert@thepiexpert.com			::
	E-mail address: (to be	e used for future annual repo	ort notification)	1
For further information c	oncerning this matter, please call:			
Robert Bush		240 618-61 at ()	159	;·
Name o	f Person	Area Code I	Daytime Telephone Number	_
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	S60.00 Filing For Certificate of S  Certified Copy (additional copy is	tatus &

Mailing Address:

TO:

Registration Section
Division of Corporations

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

2025 MAY 19 AMILE

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THEPIEXPERT LLC					
(Name of the Limited (A	Liability Compa Florida Limited I	ny as it now appears on o Liability Company)	ur <u>records.</u> )		
The Articles of Organization for this Limited Liab	oility Company	were filed on January	6, 2023	_ and assi	gned
Florida document number L23000014921					
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited liab	ility company here:			
The Pi Expert LLC					
The new name must be distinguishable and contain the wor-	ds "Limited Liabil	lity Company," the designa	tion "LLC" or the abbre	viation "L.L	C."
Enter new principal offices address, if applicab	ole:	7901 4th St N			
(Principal office address MUST BE A STREET	ces address, if applicable:  7901 4th St N	2[			
		St. Petersburg, FL 33	702		25 F
				. 7	A Y
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7901 4th St N		1 3	9
		#26951			Ą
		St. Petersburg, FL 33	702	<del></del>	<del>-</del>
					Ŧ
B. If amending the registered agent and/or reg agent and/or the new registered office address		address on our record	is, <u>enter the name c</u>	of the new	register
Name of New Registered Agent:	Registered Age	ents Inc			
New Registered Office Address:	7901 4th St N.	STE 300			
	<del></del>	Enter Florida sti	reet address		
	St. Petersburg		, <b>Florida</b> 33702	2	
		City	<del></del>	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:

MGR =	Manager
AMBR =	Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			☐Remove
			□Change
			□Add
			Remove
			[] Change
			□Remove
			□Change

	<u></u>			· · · · · · · · · · · · · · · · · · ·	<del></del>
				·-	
			. <u></u>	<u>.                                    </u>	
<del></del>					
			<u> </u>	<del></del>	
	<u> </u>	<u></u>			
			<u>.                                    </u>		
		<u></u>			
				<del></del>	
					<del></del>
				, ,	<b>x</b> ,
ective date, if other than a effective date is listed, the date te: If the date inserted in the cument's effective date on the	is block does not n	neet the applicab	date of fitting or more	man 90 days after titte	g.) ruisuani to oobo.
cord specifies a delayed effe is filed.	ective date, but not	an effective time	:, at 12:01 a.m. on	the earlier of: (b) 7	The 90th day after t
May 14		2025			
			•		

Filing Fee: \$25.00

Typed or printed name of signee