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Y. SCOTT AUG 1 9 2023

COVER LETTER

TO:		stration Se sion of Cor						
	ğ	SG360WC	ORKS LLC					
SUBJE	СТ: _			nited Liability Company				
The enc	losed	Anicles of	Amendment and fec(s) are sub	mitted for filing.				
Please r	eturn :	all correspo	ndence concerning this matter	to the following:				
			Cheyenne Moseley					
Name of Person								
Legalzoom.com, Inc.								
			<u></u>	Firm/Company				
			101 N Brand Blvd 11th Fl					
				Address				
			· · · -					
For furt	her inf	ormation c	E-mail address: (oncerning this matter, please ca	to be used for future annual reall:	eport notification)		
Cheyen	ine Mo	seley		800 773 at ()	-0888			
		Name o	i Person		Daytime Telepl	hone Number		
Enclose	d is a	check for th	ne following amount:					
□ \$ 25	,00 Fil	ing 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 tadditional 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SG360WORKS LLC

company has been notified in writing of this change.

(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 $\frac{01/11/2023}{}$ and assigned Florida document number $\frac{L23000024481}{}$
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
TRNSFRM LLC
The new name must be distinguishable and contain the words "Limited Liability 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)
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 registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address: Enter Florida street address
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 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 i

If Changing Registered Agent, Signature of New Registered Agent

being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

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
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			Change
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`an et Vote:	tive date, if other than the date of filing:
e re The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 9 90th day after the record is filed.
	SULY 5th 2023
	* * *
	Cours 2.00
	Signature of a member or authorized representative of a member
	Santiago Gomez-Ribeiro
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00