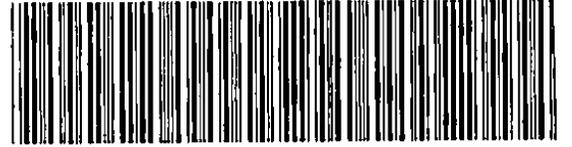


L23000051853



200399478642

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

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FILED  
2023 FEB -7 AM 11:12  
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DIRECTOR'S OFFICE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
SEC. OF STATE  
TALLAHASSEE, FL

2/8/2023

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 435933 8387143

AUTHORIZATION :

COST LIMIT : \$ 25,000



ORDER DATE : February 6, 2023

ORDER TIME : 8:56 AM

ORDER NO. : 435933-001

CUSTOMER NO: 8387143

DOMESTIC AMENDMENT FILING

NAME: INNOVIOR MARKET RESEARCH LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT  
       RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER'S INITIALS: \_\_\_\_\_

TO: Registration Section  
Division of Corporations

SUBJECT: INNOVIOR MARKET RESEARCH LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

NIRANJAN N BAPAT  
Name of Person  
INNOVIOR MARKET RESEARCH LLC  
Firm/Company  
5764 N ORANGE BLOSSOM TRL PMB 61660  
Address  
ORLANDO FL 32810  
City/State and Zip Code  
niranjانبapate@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NIRANJAN N BAPAT at (646) - 239 - 7643  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 Address:**  
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

TO  
ARTICLES OF ORGANIZATION  
OF

FILE

2023 FEB -7 A

INNOVIOR MARKET RESEARCH LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

SECRET  
TALLAHASSEE

The Articles of Organization for this Limited Liability Company were filed on 01/27/2023 and assign  
Florida document number L23000051853

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 "L.L.C."

**Enter new principal offices address, if applicable:**

5764 N Orange Blossom Trl, PMB 61660

**(Principal office address MUST BE A STREET ADDRESS)**

Orlando, FL 32810-1023

**Enter new mailing address, if applicable:**

5764 N Orange Blossom Trl, PMB 61660

**(Mailing address MAY BE A POST OFFICE BOX)**

Orlando, FL 32810-1023

**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*

Florida

*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 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 by or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of A</u>
AMBR	Mayankbhai N Bhanushali	5764 N Orange Blossom Trl, PMB 61660	<input type="checkbox"/> Add
		Orlando, FL 32810	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Innovior Market Research LLP	5764 N Orange Blossom Trl, PMB 61660	<input type="checkbox"/> Add
		Orlando, FL 32810	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

