## L23000063538

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## **COVER LETTER**

TO: Registration Section
Division of Corporations

Tallahassee, FL 32314

SUBJECT: Rhyze D	igital Consulting LLC		
	Name of Lin	nited Liability Company	
The enclosed Articles of	f Amendment and fec(s) are sul	bmitted for filing.	2023 J.J. 26
Please return all corresp	ondence concerning this matter	to the following:	
	Jordan Salvador		ΛΗ 9: <b>I</b> 3
		Name of Person	$\overline{\omega}$
	Rhyze Digital Consult	ting LLC	
		Firm/Company	
	1114 Tequesta St AP	T 4	
		Address	
	Fort Lauderdale, FL 3	33312	
		City/State and Zip Code	
	Jordan@Rhyze.Digital	l (to be used for future annual report no	stification)
For further information	concerning this matter, please c	•	, meaning
Jordan Salvador		954 <u>2920893</u>	
Name	of Person	Area Code Daytii	me 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 Addre		Street Address:	
Registration Division of (		Registration Se Division of Co	
P.O. Box 633		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rhyze Digital Consulting 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 \_02/01/23 and assigned Florida document number \_\_\_\_\_L23000063538 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Rhyze Digital LLC 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 Florida

## 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.

City

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
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record specifies a delayed effective is filed.	e date, but not an	effective time	e, at 12:01 a.m	. on the carlie	er of: (b) T	he 90th da	y after the
ated July 14	,	2023	. •				
<del></del> :							
Jordan Solva	lor						

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