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| Special Instructions to | Filing Officer: |
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CT CORP (850) 656- 4724

3558 lakesore Drive Tallahassee, FL 32312

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| | Acc#I20160 | 000072 W |
| Name: | CULTURAL EXCHANGE | SERVICES, LLC |
| Document #: | | |
| Order #: | 14945164 - 12 | |
| Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of | | |
| Apostille/Notarial Certification: | Country of Dest Number of Cert | |
| Filing: | Certified: ✓ Plain: COGS: | Email Address for Annual Report Notifications: |
| Availability Document Examiner Updater Verifier W.P. Verifier Ref# | Amount: \$ 55.00 | |

Thank you!

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 prov 19 AM 8: 59 Cultural Exchange Services, 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 $\frac{03/23/2023}{1}$ and assigned Florida document number L23000134801 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: TPG Cultural Exchange Services, 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

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:

| AMBR = Authorized Member | | | | |
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MGR = Manager

| amending any oth info | mnation, enter chan | ige(s) here: (| Attach addition | al sheets, if neces. | sary.) |
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| DocuSigned by: | | · | | | |
| C68B4A0F67914CD | Signature of a men | nber or authorize | d representative o | f a member | |
| Michael C. Ranson | | | | | |
| | т. | ned or printed as | ······································ | | |

Filing Fee: \$25.00

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 | | | | |
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| <u>Title</u> | <u>Name</u> | Address | Type of Action | |
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Filing Fee: \$25.00