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A. RIVERS
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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Co	rporations		
CONTRACTOR CONTRACTOR	Solutions LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Daniel Reyes		
	•	Name of Person	· · · · · · · · · · · · · · · · · · ·
	ZenBusiness INC.		
		Firm/Company	
	336 E. College Ave Suite	301	
		Address	
	Tallahassee, FL 32301		
		City/State and Zip Code	
	fulfillment@zenbusiness.co		
	E-mail address: (to be used for future annual report noti	fication)
For further information of	concerning this matter, please o	ali:	
Daniel Reyes		512 237-7349	
Name o	of Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for the	he 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		Street Address:	ari un
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P.O. Box 632		The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Major Play Solutions 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 $\frac{03/27/2023}{1}$ _____ and assigned Florida document number 1.23000153922 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 "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 City

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Bryan Dorsey		🗀 Add
			≣Remove
			□Change
AMBR	Prestinia, Inc.	1942 Broadway St Ste 314C	■Add
		Boulder, CO 80302	□Remove
		US	□Change
			🗆 Add
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			□Remove

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Filing Fee: \$25.00