

L23000160988

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

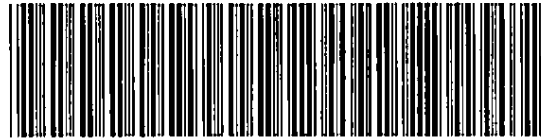
(Document Number)

Certified Copies _____ Certificates of Status _____

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J. HORNE
MAY - 8 2023

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FILED
2023 MAY -8 PM 4:45
SECRETARY OF STATE
TALLAHASSEE FL 323

FILED MAY -8 2023 4:45 PM 000



DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA

2023 MAY -8 PM 4:51
DEPT OF REVENUE

COVER LETTER

Registration Section
Division of Corporations

SUBJECT: Aperio USA LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Brian Ward
Name of Person

~~Aperio~~ Aperio USA LLC
Firm/Company

607 Burgundy Lane
Address

Fort Walton Beach FL 32547
City/State and Zip Code

Brian.Ward@imaginationfoundry.com
E-mail address: (to be used for future annual report notification)

For other information concerning this matter, please call:

Brian Ward at (850) 499-2720
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

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

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

FILED
2023 MAY -8 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FL

Articles of Organization for this Limited Liability Company were filed on _____ and assigned
document number _____

This amendment is submitted to amend the following:

I am changing name, enter the new name of the limited liability company here:

_____ new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

I am changing principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

I am changing mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

I am changing 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

I, 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

MR = Manager
BR = Authorized Member

[illegible]

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

record specifies a delayed effective date, but not an effective time, at 12.01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 5-8-23

B. K. W.
Signature of a member or authorized representative of a member

Brian K. Ward
Typed or printed name of signer