# 12/1**6**24, 10:04 Al Division of Corporations

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īo:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062 : (323)962-8600

Fax Number : (323)389-0502

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

mail	Address:	 	 		

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K. SALY

### **COVER LETTER**

TO:	Registration Se Division of Cor			
25212.612	ADOBON	LLC		
SUBJEA	CT:		ed Liability Company	
The ene	losed Articles of	Amendment and fee(s) are subn	utted for filing.	
Please re	eturn all correspo	ondence concerning this matter to	o the following:	
		Mike Town		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm Company	<del></del>
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		Austin, TX 78717		
			City/State and Zip Code	
		robrii24@yahoo.com	s be used for future annual report i	ontification !
For furtl	her information e	concerning this matter, please cal		
Mike To	own		800 773-0888	
Name of Person		f Person	at () Area Code Day	time Telephone Number
Enclosed	d is a check for the	he following amount:		
□ \$25.	.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 nssee, FL 32314	STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations g // Center Circle

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



From: Rajiv Srivastava

ADORON LLC

(Name of the Limited Liability Company as 11 now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/14/2023 and assigned Florida document number 12/3000186854

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 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 Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

Enter Florida street address

, Florida \_\_\_

To:

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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	8/ Roberto Isaac R	Rodriguez		
18		~		
/S —	Sign	ature of a member or authorized represen	tative of a member	
/S —	Sign	ature of a member or authorized represen	lative of a member	

Ta:

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