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(Requestor's Name)

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(City/State/Zip/Phone #)

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2023 JUL -6 PM 3:23 PM -6 PM 4:15

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AVDOCSI ACQUISITION LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

MARCO RUSCONI

Name of Person

STALLION SI

Firm/Company

3951 MERLIN DR

Address

KISSIMMEE FL 34741

City/State and Zip Code

marco@stallion-si.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARCO RUSCONI

Name of Person

at (407)

Area Code

484 7151

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
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2023 JUN -6 PM 4:15

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

AVDOC51 ACQUISITION 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 05/24/2023 and assigned Florida document number L2344254902

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 "L.L.C."

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:

MARCO RUSCONI

New Registered Office Address:

3951 MERLIN DR

Enter Florida street address

KISSIMEE

City

Florida

34741

Zip Code

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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MARCO RUSCONI	3951 MERLIN DR	<input checked="" type="checkbox"/> Add
		KISSIMMEE, FL 34741	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
BOARD OF DIRECTORS	LOUIS HORSCHEL	SAME AS ABOVE	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
BOARD OF DIRECTORS	PETER ZELIFF	SAME AS ABOVE	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
BOARD OF DIRECTORS	LEE LAUDERBACK	SAME AS ABOVE	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
BOARD OF DIRECTORS	ARIEL LUEDI	SAME AS ABOVE	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change


2023 JUN -6 AM 11:10
OFFICE

2023 JUL -6 AM 11 15

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the 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.

6 July 2023



Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00