Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000424830 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Fax Number : (813)436-5206

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

年mail Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MARTIN WALTER LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

Fax: 8134365206

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARTIN WALTER LLC	
(Name of the Limited Liability Company as it now appears of (A Florida Limited Liability Company)	on our records.)
he Articles of Organization for this Limited Liability Company were filed on 05/25	2/2023 and assigned
lorida document number L23000256918	•
nis amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability company here	:
PIRIUS NLP LLC	
he new name must be distinguishable and contain the words "Limited Liability Company," the design	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
D 1 1 20 11 MUCT DE 4 CEDEUT ADDITOC	28
	
Inter new mailing address, if applicable:	
	· · · · ·
Mailing address MAY BE A POST OFFICE BOX)	
. If amending the registered agent and/or registered office address on our reco	·
gent and/or the new registered office address here:	orus, enter the name of the new registe
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida	street address
	, Florida
City	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

12/13/2023 10:10.54 PST

To: 18506176383

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From: Registered Agents Inc.

Fax: 8134365206

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>	Name	<u>Address</u>	Type of Action
		· · · · · · · · · · · · · · · · · · ·	□Add
			□Remove
			Chonge
			□Add
		Remove	
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			(
			□Change
			□Add
			□Remove

To: 18506176383

From: Registered Agents Inc.

	-
	<u> </u>
(If an et <u>Note:</u>	ive date, if other than the date of filing: [cetive 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) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
the reco	ed 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 led.
Dated	December 13 2023
	Signature of a member of audiorized representative of a member