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### **COVER LETTER**

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## 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ay Network LLI	
( <u>Name of the Limited Li</u> (A Fl	ability Company as it now appears on orida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabili Florida document number	ty Company were filed on $\frac{\sqrt{3}}{2}$ .	uly 05, 2023 and assigned
This amendment is submitted to amend the following	g:	
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 design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AL	ODRESS)	
		· · · · · · · · · · · · · · · · · · ·
		20/
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office address her	amend the following:  the new name of the limited liability company here:  c and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  dress, if applicable:  TBE A STREET ADDRESS)  applicable:  OST OFFICE BOX)  agent and/or registered office address on our records, enter the name of the new registered doffice address here:  Enter Florida street address  Enter Florida street address  Florida	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida st	reet address
	City	, Florida 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 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>	Address	Type of Action
MGR	Rizwan Hakim	28536 Bennington Dr.	□Add
		Wesley Chapel, FL 33544	□Remove
			NChange
MGR	Laura Abigail Hakim	28536 Bennington Dr.	□Add
		Wesley Chapel, FL 33544	□Remove
			<b>M</b> Change
			□Add
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lf an effecti Note: If t	date, if other than the date of filing:	
e record sp rd is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after to the second of the sec	the
Dated	August 16, 2023.	
	•	
	The state of the s	
	Signature of a member or authorized representative of a member	

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