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SECRETARY OF STATE

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COVER LETTER

TO:	Registration Se Division of Cor				
SUBJE	CT: FOUR P	ILLARS, LLC			
		Name of Lim	ited Liability Company		
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please (return all correspo	indence concerning this matter	to the following:		
		Corpor	ate Maintenance Lea	ıd	
			Name of Person		
		Proc	essing Department		
			Firm(Company		_
		1	450 Vassar St		2023 DEC 14 PM 2: 58 SECRETARY OF SIGN
			Address		E0 -
			Reno, NV 89502		100 F
		-	City-State and Zip Code		
		h-mail address: (to be used for future annual report notific	cation)	
For fur	ther information e	oncerning this matter, please ca	ıll:		រជា ===
	Process	ing Department	at (800) 638-2320		
		f Person		Telephone Number	
Enclose	ed is a check for th	ne following amount:			
	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
	Registr Divisio P.O. B	ING ADDRESS; ration Section on of Corporations ox 6327 assec, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen	tions	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	R PILLARS, LLC	
(<u>Name of the Limited Liabilit</u> (A Florida	v Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on 10/20/23	and assigned
Florida document number L23000482486	_•	
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limi</u>	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	ESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	,	55
		PROTEIN THE TRANSPORT
		五字 5
B. If amending the registered agent and/or registered agent and/or the new registered office addi-	tered office address on our records, ress here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Flor	
	Ciţv	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>	Address	Type of Action
MGR	Sathish K Ramachandran	24000 LAVENDER MEADOW PL	Add
		ASHBURN. VA 20148	☑ Remove
			2027 DEC
MGR_	Manjula Sathish	41740 Daisy Meadow Dr	1000年
		Ashburn. VA 20148	COLD Repopre
			Change
MGR	Suresh Nair Venmarathil	41673 Misty Dawn Dr	
		Ashburn, VA 20148	Remove
			Change
<u>MGR</u>	Basheer Ahamed	41639 Revival Dr	Add
		Ashburn, VA 20148	Remove
			∠ Change
			Remove
			Change
			Add
			Remove
			Change

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	Mg 22
fective date, if other than the date of filing: N/A	(optional)
If the date inserted in this block does not meet the applicable statutory	g or more than 90 days after filing.) Pursuant to 605.0207 (2 y filing requirements, this date will not be listed as the
locument's effective date on the Department of State's records.	
e record specifies a delayed effective date, but not an effect The 90th day after the record is filed.	tive time, at 12:01 a.m. on the earlier of
Dated 12/01/2023	
	•

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Typed or printed name of signee

Filing Fee: \$25.00