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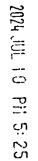
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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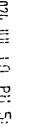
Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MAPD HEIPCH	CSK LLC I Liability Company
The enclosed Articles of Amendment and fee(s) are submit	tted for filing.
Please return all correspondence concerning this matter to	the following:
Lindsay	KRYShka Name of Person
BE Famil	Y Ventures LLC Firm/Company
4755 Techr	nology Way, Suite 108
Boca Rati	City/Stale and Zip Code Class Compensation (Compensation)
For further information concerning this matter, please call:	
Lindsay Kryshka	at (Daytime Telephone Number) 97
Enclosed is a check for the following amount: \$\sim \text{S25.00 Filing Fee} \text{Certificate of Status}\$	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAPD Helpdesk (Name of the Limited Llability Compa (A Florida Limited I	ny as it now appears on our records.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 230005323</u> 27	were filed on $\frac{Nov}{29}$, $\frac{29}{2023}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ity Company," the designation "LLC" or the abbreviation "L.L.C." 16796 Strasbourg Lane Delray Beach, FL 33446
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	16796 Strasbourglane DelRay Brach, FL 33446
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	~
New Registered Office Address:	Enter Florida street address
	City Zip Code
Nau Danietarad Agant's Signature if shanging Dagistarad Agant.	1)

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 dutics, 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.

New Registered Agent's Signature, if changing Registered Agent:

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
4mbe	Nicholas Badal	1761 W Hillsboro Blydth	LCC DAdd
		Deazheld Beach, FL 3344	2_ixRemove
			□Change
AMBR	Les ley faeadise	1761 W HILBOEOBING #406	2 □Add
		Deocheid Frach, Fr 3344	2 DeRemove
			□Change
MGR	Lesley Paladise	16796 Strasbourg Lane	Ádd
		Delnay Beach, FL 33446	D □ Remove
			□Change
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			□Remove
		<u> </u>	□Change
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Note: 1	ve date, if other than the date of filing: <u>JUNE 24, 2024</u> (optional) retive 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 605.02 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ent's effective date on the Department of State's records.
he record ord is file	I 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 ed.
Dated	June 25, 2024
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Duten_	JONE 25 2024 My day Kryphka Signature of a member of authorized representative of a member Lindsuy Klishka Typyl or printedname of signee