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(Re	questor's Name)	·····
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

	Registration Se Division of Cor					
	SPARK AIOT LLC					
SUBJEC	T:	Name of Lim	ited Liability Company			
The enclo	sed Articles of	Amendment and fee(s) are sub	unitted for filing.			
Please ret	urn all correspo	ondence concerning this matter	to the following:			
		ANGELICA I., BELTRAI	N.	5 20		
			Name of Person	73.0 TECT		
		BELTRAN ACCOUNTIN	G SERVICES CORP	2023 DEC 22 SECRETAR		
			Firm/Company			
		6303 BLUE LAGOON DI	R. SUITE 400			
			Address	1714 0		
		MIAMI, FLORIDA 33120	,	,		
			City/State and Zip Code			
		abeltran@beltranaccounting		·		
For furthe	er information c	E-mail address: (oncerning this matter, please c	to be used for future annual report to all:	o(dication)		
ANGELI	ICA L. BELTR.	AN	305 456-1999			
	Name o	d Person	at () Area Code Dayt	ime Telephone Number		
Enclosed	is a check for t	he following amount:				
■ \$25.4	00 Filing Fee	S30.00 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 Addres		Street Address: Registration S	Section		
	Division of C		Division of C			
	P.O. Box 632		The Centre of			
	Tallahassee.	FL 52514	2415 N. Mon	roe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SPARK AILOT LLC				
(<u>Name of the Limited Li</u> (A Fl	<u>ability Compar</u> orida Limited L	<u>iv as it now appears on</u> inbility Company)	our regords.)	
The Articles of Organization for this Limited Liabili		were filed on 12/14/2	2023	and assigned
lorida document number 1.23000551632	······································			
his amendment is submitted to amend the following	g:			
If amending name, enter the new name of the	limited liabi	lity company here:		
SPARK AIOT LLC				
he new name must be distinguishable and contain the words	"Limited Liabili	ty Company," the design	sation "LLt" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable	:			2023 SEG
(Principal office address MUST BE A STREET ADDRESS)		N/A		EC 2
				A.A.
Enter new mailing address, if applicable:		N/A		00 B 3
Mailing address MAY BE A POST OFFICE BOX	()			_ 四国 方
	_			3.53
3. If amending the registered agent and/or regist gent and/or the new registered office address he		ddress on our reco	rds, <u>enter the</u>	name of the new registe
Name of New Registered Agent:	i/A			
New Registered Office Address:	/A	·····	.	
		Enter Florida s	street address	
			. Florid	a
		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 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
			□Add
			□Remove
			☐ Change
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fective date, if other than the date of filing:	(optional)
in effective date is listed, the date must be specific and cannot be prior to da	te of filing or more than 90 days after filing.) Pursuant to 605,020
ote: If the date inserted in this block does not meet the applicable cument's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed a
entirent's effective date on the peparanent of state s records.	
	12.01
ecord specifies a delayed effective date, but not an effective time, is filed.	at 12:01 a.m. on the earlier of; (b)—The 90th day after th
JANUARY 01 2024	_
nted 57th Orthographics	
7-8-1	/
Signature of a mentioned authorized	Leannes austrice of a mambar

Filing Fee: \$25.00

Typed or printed name of signee