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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MILAM HOWARD, ET.AL.

Account Number : I20000000206 Phone : (904)357-3660 Fax Number : (904)357-3661

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

Email Address: RA@MHCorpServices.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN, CYANO PARENT, LLC

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T. LEMIEUX

FEB - 5 2024

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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If Changing Registered Agent, Signature of New Registered Agent

02/2/2024 07:14 AM

TO:18506176383 FROM:9043573662

Page: 3

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	Amanda Foss	205 Zeagler Drive	≣ Add
		Suite 302	□Remove
		Palatka, FL 32177	□Change
		****	□Add
			□Remove
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Effective date, if other than (If an effective date is listed, the date	the date of filing:		(option	al)
(If an effective date is listed, the date Note: If the date inserted in thi document's effective date on the	s block does not meet the	applicable statutory f	or more than 90 days after fill illing requirements, this d	ing.) Pursuant to 605.0207 (3) ate will not be fisted as the
he record specifies a delayed effe ord is filed.	ctive date, but not an effe	ctive time, at 12:01 a.	m. on the earlier of: (b)	The 90th day after the
Dated February 2	. 202-	l		
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- Co-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	Signature of a member	or authorized representa	tive of a member	

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