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	Division of Corporations			٠,
	Fax Number : (850)617-6383	; -	- 1	. '
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From:		٠.	ليت	•
	Account Name : LEGALZOOM.COM INC.	. ` `	~ ,	
	Account Number : 120010300062	- ,	2:	• -
	Phone : (323)962-8600			-
	Fax Number : (323)389-0502		ũ	
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nter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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M. SOLOMON

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Tallahassee, FL 32314

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COVER LETTER

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SUBJEC	CI		Name of Lun	ited Liability Company	<u> </u>		
			Amendment and fee(s) are sub				
Please re	eturn	all correspo	ondence concerning this matter	to the following:	``		
			Cheyenne Moscley				
			1925	Name of Person			
			Legalzoom.com, Inc.			·	
		•	· .	Firm/Company			. •
			101 N Brand Blvd 11th Fl				
				Address			
			Glendale, CA 91203				
				City/State and Zip C	ode		• •
			natc95gallagher@gmail.com	n to be used for future an	mul minate name	(vulion)	
For furth	ier in	formation co	oncerning this matter, please or		mar report som	Kanteer	
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		Registr Divisio	ING ADDRESS: ation Section on of Corporations ox 6327	Regi Divis	EET/COURI stration Section sion of Corport on Building		

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liabillty C</u> (A Florida Lii	Company as it now appears an our records.) Inded Liability Company)	
The Articles of Organization for this Limited Liability Com Florida document number <u>L24000040904</u> .	opany were filed on 01/22/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	Hiability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or	the abbreviation "L.IC"
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES		
		-
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register- registered agent and/or the new registered office address	-	nter the name of the new
Name of New Registered Agent:	- 	
New Registered Office Address:	Enter Florida street address	

Thereby 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. Thereby 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>	Name	Address	Type of Action
AMBR	Jeffrey Lochner		
		182 Lexington Ave., Apt. 1A New York, NY 10016	
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			Add
			☐ Remove
	•		□ Change = 1
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ted March 3rd . 2024.	
Signature of a member or authorized representative of a member	