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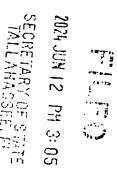
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## **COVER LETTER**

Division of Corp			
SUBJECT: FR	JULNCY EQ Name of Lin	MUSUC G79 ited Liability Company	VP
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Jen Ac	Name of Person	
	1493 Sto Palm H	Firm/Company  NULLINGE WA  Address  City/State and Zip Code	\$ 4083 P. 3. 95 2000 P. 3. 95
	jenacostas E-mail address: (	1000 (10 h CO. Co	
For further information co	oncerning this matter, please ca	all:	
Jen ACGS	S+CC Person	at (1)7 254 Area Code Daytime	te Telephone Number
Enclosed is a check for the	e following amount:		
\$25.00 Filing Fee	☐ \$30.00 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 Address	•	Street Address:	

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Frequency Constitution	ed Liability Company as (A Florida Limited Liabil	it now appears on our (eccity Company)	ords.)
The Articles of Organization for this Limited Li Florida document number <u>2 2400</u>		e filed on JAUJ	2 2c 2 tapld assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of Frequency ES ATS. The new name must be distinguishable and contain the w			S, C.C. C.L.C."
Enter new principal offices address, if applica	able:		
(Principal office address MUST BE A STREE	<u>T ADDRESS)</u>		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE I  B. If amending the registered agent and/or reagent and/or the new registered office addres	egistered office addr	ess on our records, <u>ent</u>	er the name of the new registered
Name of New Registered Agent: New Registered Office Address:	Simpel PA	Enter Florida street add	lress
		,	Florida
		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.

I 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 ———— □Add ————— □Change \_\_\_\_\_ □Remove \_\_\_\_ Change DAdd □Remove نے دی⊐Change  $\square$ Add ———— □Change ————— □Add ———— □Remove ——————— Change ———— □Remove

, , , , , , , , , , , , , , , , , , ,	shoots if necessary.)
f amending any other information, enter change(s) here: (Attach additional	Sheets, if necessary,
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	12 元
	SEC PH. II
	四日 05
the date of filing:	(optional)  (optional)  Pursuant to 605.0207
E. Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing o  Note: If the date inserted in this block does not meet the applicable statutory file.	iling requirements, this date will not be listed as
Note: If the date on the Department of State's records.	
document of 22-01 a	m on the earlier of: (b) The 90th day after the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.	
record is filed.	
10016/6 Th, 2024.	
Dated Who Co	
Dated April 16 th, 3024.  Signature of a member or authorized representations.	native of a member
1. Macka	
Typed of printed name of sig	gnee

Filing Fee: \$25.00