Division of Corporations

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To:

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From:

Account Name : INCFILE.COM LLC

Account Number : I20220000070 Phone

: (888)462-3453

Fax Number

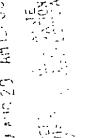
: (877)919-2613

Enter 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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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BIMERA LLC



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COVER LETTER

TO: Registration Sc Division of Cor				
BIMERA I	LC			
SUBJECT:	Name of Lim	nted Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filmg.		
Please return all correspo	ondence concerning this matter	to the following:		
	LOVETTE DOBSON			
		Name of Person		
		Firm Company		
	Firm Company			
	17350 STATE HWY 249 STE 220			
		Address		
	HOUSTON, TX 77064			
		City State and Zip Code		
	EFILE1234@1NCTILE.CO	on to be used for future annual re	ent notification)	
For further information c	oncerning this matter, please c		,	
LOVETTE DÖBSÖN		1	1 888-462-3453	
Name of Person		Area Code	Daytime Felephone Number	
Enclosed is a check for the	he following amount:			
■ \$25,00 Filing Fee	Cl \$30.00 Filing Fee & Certificate of Status	11\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sp0,00 Filing Fee, Certificate of Status & Gertified Copy (additional copy) - enclosed)	
<u>Mailing Addres</u> Registration		<u>Street Add</u> Registrat		
Division of Corporations		Division of Corporations		
P.O. Box 6327			The Centre of Tallahassee	
Enclosed is a check for the \$25,00 Filing Fee Mailing Address Registration 5 Division of C	he following amount: El \$30.00 Filing Fee & Certificate of Status ss: Section forporations	Il \$55.00 Filing Fee & Certified Copy additional copy is enclosed the Street Add Registrat Division The Cent	Certificate of Statu Gentified Copy (additional copy) - encl Iress: ion Section of Corporations	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



BIMERA LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{02/08/2024}{2024}$ and assigned Florida document number $\frac{1.24000072121}{1.24000072121}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Lumited Liability Company," the designation "LLC" or the aboreviation "LLC" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _____. Florida ____ City 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 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>	<u>Address</u>	Type of Action
AMBR	Melody Raja	1317 Edgewater Dr #1201	_ ■Add
		Orlando, FL 32804	= □Remove
			LlChange
<u> —</u>			一意意で
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			E)Change

Filing Fee: \$25.00

Muhammad Bilal Ghazanfar Raja Typed or printed name of signee