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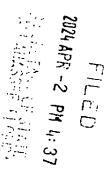
(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)	<i>,</i>
Certified Copies	Certificates of	f Status
Special Instructions to	Filing Officer: ORNE R 1 1 2024	i





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COVER LETTER

Registration Section

TO:

Division of Cor	porations		
	ettia Innovation, LLC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Eric L. Hearn		
	Name of Limited Liability Company return all correspondence concerning this matter to the following: Eric L. Hearn		
	Moseley, Prichard, Parrish	, Knight & Jones, P.A.	
		Firm/Company	Felephone Number S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) ion orations Ilahassee
	501 W. Bay Street, Second	Name of Person Inight & Jones, P.A. Firm/Company Door Address City/State and Zip Code be used for future annual report notification) at (Area Code Daytime Telephone Number Certified Copy (additional copy is enclosed) Street Address: Registration Section Division of Corporations The Centre of Tallahassee	
		Address	
	Jacksonville, FL 32202		
		City/State and Zip Code	
			of Court on
For further information of			uncation)
	oncerning this matter, preuse e		
Eric L. Heam			
Name o	f Person	Area Code Daytir	me Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Registration 5	Section	Registration Se	
P.O. Box 632	.7	The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2024 APR -2 PH 4: 37

Prisca Sapiettia Innovation, LLC

(Name of the Limited Liability Company as it now appears on our records.)

he Articles of Organization for this Limited Liability Compa	ny were filed on March 18, 2024	and assigned
orida document number L24000133239		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited li	ability company here:	
risca Sapientia Innovation, LLC		
ne new name must be distinguishable and contain the words "Limited Lie	bility Company," the designation "LLC" or t	he abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
nter new mailing address, if applicable:		,
Mailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered offic	e address on our records, enter the	name of the new registo
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	Florid	aZip 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
			□Remove
			☐ Change
			□Add
			□Remove
			☐ Change
	 	<u></u>	□Add
			□Remove
			Change
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			□Add
			□Remove
			□Change

 If amending any other inform 	, , , , , , , , , , , , , , , , , , ,	,	A	
				
 				
<u> </u>	, , , , , , , , , , , , , , , , , , , ,			
. Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this bedocument's effective date on the inserted in the list of	ust be specific and cannot be prior block does not meet the applic	able statutory filing requirer	(optional) days after filing.) Pursuant to 605.020 nents, this date will not be listed a	97 (3)(is the
the record specifies a delayed effects cord is filed.	ive date, but not an effective t	ime, at 12:01 a.m. on the ear	lier of: (b) The 90th day after th	e
Dated March 23	. 2024	<u></u> .		
CUII	Signature of a member or auth	orized representative of a memb	per	
Eric L. Hearn				
	Typed or print	ted name of signee		

Filing Fee: \$25.00