L24000145308

Office Use Only



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2024 APR -8 PM 5: 13
SEC NAME OF STATE

COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: AI Trusted Tech LLC Name of Limited Liability Company |
| The enclosed Articles of Amendment and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| TAN D. DARRAH Name of Person |
| Firm/Company |
| 124 Happy Haven Drive, Lot 13 |
| 124 Happy Haven Drive, Lot 13 Address OSprey FL 34229 City/State and Zip Code ian inversource ys @ gmail-com E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| TAN D. DARRAH at (786) 443-9564 Name of Person Area Code Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| □ \$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee, 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 810.5
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AI Trusted Tech 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 | Parch 25, 2024 and assign | ed |
|--|--|--|-------------|
| Florida document number <u>L24000145308</u> | | | |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the limited liab | oility company here: | | |
| The new name must be distinguishable and contain the words "Limited Liabi | liry Company " the design | ration "LLC" or the abbreviation "LLC | |
| | , company, and 20118. | | |
| 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 agent and/or the new registered office address here: Name of New Registered Agent: | address on our reco | ds, enter the name of the new re | gistered |
| New Registered Office Address: | | | |
| | Enter Florida s | treet address | |
| | | Florida Zip Code | |
| Naw Degistered Agent's Signature if shanging Degistered Agent | | λφ Code | |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change. | ree to act in this capo performance of my provided for in Chap | duties, and I am fa <mark>mil</mark> iaræith a. oter 605, F.S. Or, if th is d oc ume. | nd |
| If Cha | nging 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 Title Name Address Type of 2263 SW 37th Ave.

AMBR Emin EKer Apt 506, Miami, FL 33145 Add _____ Remove AMBR Sameer Khetarpal East Brunswick, NJ 08816 WAdd □Remove

| | ending any other information, enter change(s) here: (Attach additional sheets, if necessal | - / | |
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| (If an ef Note: | fective date, if other than the date of filing: [Coptional Sective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. If the date inserted in this block does not meet the applicable statutory filing requirements, this date ment's effective date on the Department of State's records. | g.) Pursuant to | |
| he reco ord is fi | rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) T led. | he 90th day TALLAHAY | ator the |
| Dated | March 31 2024 | TARK! | |
| | about the | <u> </u> | <u> </u> |
| | Signature of a member or authorized representative of a member | STA | 5: 13 |
| | IAN DAVID DARRAH | <u> </u> | |

Filing Fee: \$25.00