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(((H24000173632 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 : (844)449-3624 : (512)597-0678 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. STATE OF STA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MCG LEADERSHIP STRATEGIES, LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H240001736323

مؤد	7				
•	MCG Leadersh	ip Strategies, LLC		9	
		(Name of the Limited Liabili (A Florida	ty Company as it now appears of Limited Liability Company)	n our records.)	
	of Organization ment number L	•	Company were filed on 04/15	/2024	and assigned
his amendn	nent is submitted	d to amend the following:			
L If amend	ling name, <u>ente</u>	r the new name of the limi	ited liability company here		
he new name	must be distinguish	able and contain the words "Lim	ited Linbility Company," the desi	gnation "LLC" e	or the abbreviation "L.L.C."
nter new p	rincipal offices	address, if applicable:			
<u>Principal of</u>	<u>Tice address Mi</u>	<u>UST BE A STREET ADDR</u>	(ESS)		
					The same the state of the state
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	nailing address				9 8
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>			
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		ed agent and/or registered <u>ered office address bere</u> :	a omice address on our reco	oras, <u>enter in</u>	e name of the new registers
<u>Learn man or</u>	the the telephone	and will address the factor of			
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<u>Nar</u>	ne of New Regi	stered Agent:	-		
Nev	w Registered Of	fice Address:			171
			Enter Floride	street oddress	
				, Flori	ida
			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.

If Changing Registered Agent, Signature of New Registered Agent

To:

Page: 3 of 4 2024-05-15 05:53:27 UTC+14 18506176383 From: ZenBusiness User H24000173632 3

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	<u>Address</u>	Type of Action
AMBR	Nancy Dupuy Greenwood	1000 Water Street	≣ Add
		Unit 1602	□Remove
		Tampa, FL 33602	Change
			□Add
			☐ Renkovc
			☐ Change
			□Add
			□Remove
			Change
		<u></u>	DAACI
			DRemovo
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To:

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ffective date, if other than the an effective date is listed, the date must	tek does not meet the applicable statu	(optional) filing or more than 90 days after filing.) Pursuan nory filing requirements, this date will not	n to 605,0207 be listed as
iote: If the date inserted in this blo ocument's effective date on the De			
ote: If the date inserted in this blo ocument's effective date on the De record specifies a delayed effective	edate, but not an effective time, at 32	101 g.m. on the earlier of: (h) The 90th d	ay after the
iote: If the date inserted in this blo ocument's effective date on the De		: 01 g.m. on the earlier of: (h) The 90th d	ay after the