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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ALL7 SERVICE LLC Account Number : I20240000077 : (407)970-8143 Phone Fax Number : (689)218-0977

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MOTA CONSULTING LLC			
(Name of the Lim	ited Liability Comp. (A Florida Limited	any as it now appears on our Liability Company)	records.
The Articles of Organization for this Limited I Florida document number <u>1.24000229864</u>	and assigned		
his amendment is submitted to amend the fol	lowing:		
A. If amending name, <u>enter the new name o</u>	of the limited liab	oility company here:	
he new name must be distinguishable and contain the	words "I muted I min	abty (Company " the designatio	n "I I C" or the abbreviation "I I C"
Enter new principal offices address, if applicable:		NA	2024 S::
Principal office address MUST BE A STREET ADDRESS)		N/A	AUG
		N/A	
Inter new mailing address, if applicable:		N/A	PH to OF S
Mailing address MAY BE A POST OFFICE	BON)	<u>N/A</u>	
		N/A	
3. If amending the registered agent and/or igent and/or the new registered office addro Name of New Registered Agent:		address on our records,	enter the name of the new registo
	N/A		
New Registered Office Address:	· 	Enter Florida sireet	address
	N/A		, Florida ^{N'A}
		Сиу	Zip Gode

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, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	GABRIEL MOTA	7209 COLONIAL LAKE DR.	= Add
		RIVERVIEW, FL	
		33578	
			ZRemove
			Change
			Z`Add
			[]Remove
			□Add
			[] [Remove
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			□Remove
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fective date, if other than the concerned are is listed, the date must oter. If the date inserted in this blockwiment's effective date on the Department.	be specific and cannot be ak does not meet the ii	prior to date of filing	s or more than 90 days a	ptional) ifter filing i Persuant to 6 this date will not be l	05 0207 isted as
ecord specifies a delayed effective is filed.	date, but not an effect	ave time, at 12 01 :	a moon the earlier of	(b) The 90th day at	ter the
August ()]	2024	·			
August, 01					
		20 May 2			

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