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Division of Corporations

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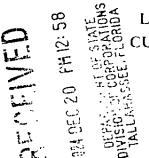
From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 : (813)436-5206 Fax Number

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

Email Address:__



LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CUPID CONSULTING PERMANENT PLACEMENT LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



CUPID CONSULTING PERMANENT PLACEMENT LLC

(Name of the Limited Liability Company as it now appears in our records.)
(A Fiorida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on $\frac{06/24}{}$	/24 and assigned	
Florida document number L24000283989			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here	:	
The new name must be distinguishable and contain the words "Limited Liabit	ity Company," the desig	nation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	3833 POWERLINE	RD SUITE 302-E	
(Principal office address MUST BE A STREET ADDRESS)	FORT LAUDERDA	LE. FL 33309	
Enter new mailing address, if applicable:	3833 POWERLINE	RD SUITE 302-E	
(Mailing address MAY BE A POST OFFICE BOX)	FORT LAUDERDA	NLE, FL 33309	
agent and/or the new registered office address here: Name of New Registered Agent:			
New Registered Office Address:	Enter Florida	street address	
	Photos.		
	Сф	, Florida Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my provided for in Cha	duties, and Lam familiar with and pter 605, F.S. Or, if this document is	
If Chan	ging Registered Agent	. Signature of New Registered Agent	

12/20/2024 #99.00 09 PST To: 18506176393 Page, 3/4 Fax: 8134365206

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 Action
MGR	RAHIMI, YUNES	3833 POWERLINE RD SUITE 302-E	
		FORT LAUDERDALE. FL 33309	©Remove
			!ZChange
			□Remove
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Effective date, if other than the of an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	be specific and cannot be prior to date of filing or more; ik does not meet the applicable statutory filing i	(optional) e than 90 days after filing.) Pursuant to 605,0207 (3)0 requirements, this date will not be listed as the
record specifies a delayed effective id is filed.	date, but not an effective time, at 12:01 a.m. on	the earlier of: (b) The 90th day after the
Dated December 20	. 2024	
	ignature of a member or authorized representative of	
<u> </u>	<u>; </u>	