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| eud irær. | | nn Consulting, LLC | | |
| SUBJECT: | | Name of Lim | ited Liability Company | |
| The enclose | d Articles of | Amendment and fee(s) are sub | omitted for filing. | |
| Please retur | n all correspo | ndence concerning this matter | to the following: | |
| | | Luke Zimmermann | | |
| | | | Name of Person | |
| | | Zimmermann Consulting, | LLC | |
| | | | Firm/Company | · · · · · · · · · · · · · · · · · · · |
| | | 2220 West First Street Apr | 1 220 | |
| | | | Address | |
| | | Fort Myers, Fl. 33901 | | |
| | | | City/State and Zip Code | |
| | | lukez@knowledgecap.com | | |
| Car fumbari | information of | E-mail address: (oncerning this matter, please c | to be used for future annual report not | ification) |
| | | oncerning this matter, picase c | | |
| Luke Zimm | | | 314 920-3599 at () | |
| | Name o | Person | at () Area Code Daytin | re Telephone Number |
| Enclosed is | a check for th | ne following amount: | | |
| ■ \$25.00 | Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | niling Addres egistration S | | <u>Street Address:</u> Registration Se | ction |
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| P.0 | O. Box 632 | 7 | The Centre of | l'allahassee |
| Ta | Hahassee, f | FL 32314 | 2415 N. Monro | e Street, Suite 810 |

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| d Liability Company as it now appears on our records.) A Florida Limited Liability Company) | | |
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| bility Company were filed on June 24, 2024 | and assign | ned |
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| rds "Limited Liability Company," the designation "LLC" or the abb | reviation "L.L.C | ·. |
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| gistered office address on our records, <u>enter the name</u> <u>here</u> : | 2012 | |
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| , | wing: the limited liability company here: | the limited liability company here: ords "Limited Liability Company," the designation "L.C" or the abbreviation "L.L.C" able: [ADDRESS] |

If Changing 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

| <u>Title</u> | Name | Address | Type of Action |
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| fective date, if other than the netfective date is listed, the date in the late in the lat | June 19, 2024 ust be specific and cannot be prior to date of filing or more than block does not meet the applicable statutory filing require | (optional) 90 days after filing.) Pursuant to 605.02 ements, this date will not be listed: |
| | Department of State's records. | |
| | | P. Carl Octobal L. S. J. |
| is filed. | ive date, but not an effective time, at 12:01 a.m. on the ea | arner of: (b) The 90th day after th |
| June 26 | . 2024 | |
| | • | |
| | | |
| Luke Zun | Signature of a member or authorized representative of a men | |

Filing Fee: \$25.00