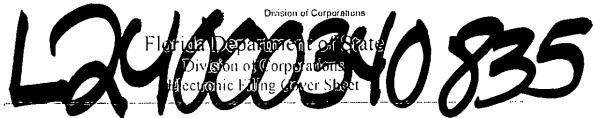
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COVER LETTER

	Registration Se Division of Cor					
		NLIMITED, DIGITAL CREA	TIVE AGENCY LLC			
SUBJEC	T:	Name of Lim	ited Liability Company			
The enclo	sed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please reti	um all correspo	ndence concerning this matter	to the following:			
		Mike Town				
			Name of Person			
		Legalzoom.com, Inc.				
			Firm/Company			
		9900 Spectrum Dr				
		Addiess				
		Austin, TX 78717				
			City/State and Zip Code	AND AND AND ASSESSMENT OF THE PROPERTY OF THE PARTY OF TH		
		nns1281@yahoo.com E-mail address: ()	to be used for future annual report of	gufication)		
For furthe	r information c	oncerning this matter, please or				
Mike Tov			300 773-0888			
	Name of	f Person	Area Code Days	ime Telephone Number		
Enclosed	is a check for th	e following amount:				
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Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Division of Corporations
Clifton Building
2601 Executive Center Circle
Tallahassee, FL 32301

To: Page: 4 of 6

2024-09-05 08:59 00 PDT

THYNK UNLIMITED, DIGITAL CREATIVE AGENCY LLC

13236068205

From, Rajiv Srivastava

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability (A Florida Li	Company as it new appears on outmited Liability Company)	r records.)
The Articles of Organization for this Limited Liability Con Florida document number <u>1.24(00)340835</u>	mpany were filed on $\frac{08/02/201}{}$.	and assigned
This amendment is submitted to amend the following:		202
A. If amending name, enter the new name of the limite	d liability company here:	1024 SEP
Deta8 LLC		
The new name must be distinguishable and contain the words "Limited	d Cability Company," the designati	on "LLC" or the abbreviation "L.L.G."
Enter new principal offices address, if applicable:		::: [i]
(Principal office address MUST BE A STREET ADDRE.		ر ي
		. Ç.)
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register registered agent and/or the new registered office address Name of New Registered Agent: New Registered Office Address:		
	Florida	
and the second s	Cay	, Florida
New Registered Agent's Signature, if changing Registered A	Agent:	
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and com accept the obligations of my position as registered agen being filed to merely reflect a change in the registered company has been notified in writing of this change.	iplete performance of my du nt as provided for in Chapte	ties, and I am familiar with and r 605, F.S. Or, if this document is

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 = N $AMBR = A$	lanager authorized Member		
Title	Name	Address	Type of Action
The second of the second of			
			☐ Remove
			☐ Change
			□ Aċd
			B Remove
			□ Change
			Add
			☐ Remove
			□ Change
T-electronic capping p-th-mids			O Acd
			□ Ветюче
			☐ Change
			D Add

□ Change

□ Add

☐ Remove

□ Change

11 441	ending any other information, enter change(s) here: (Attach additional sheats, if necessary.)
,	

Note.	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	AUGUST 50 2024.
	Signature of a member of authorized representative of a member
	Natalie Soares

Page 3 of 3

Filing Fee: \$25.00