# L24000399279

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## **COVER LETTER**

TO: Registration Section Division of Corpor			
SUBJECT: Syve	dial Digita Name of Limited L	1 Mar Ketive	<u> </u>
The enclosed Articles of Am	endment and fee(s) are submitte	d for filing.	
Please return all corresponde	nce concerning this matter to the	e following:	
	Verlow Bra	Name of Person	<del></del>
		Firm/Company	
	3812 NW	40 th st	
-		ry/State and Zip Code  Ry/State and Zip Code  Ry/State and Zip Code  used for futury annual report notification	<u>33993</u> <u>Look.com</u>
For further information conc	erning this matter, please call:		
Verlow Brane of Pe	vdor Verrey	at (239) 410 - Area Code Daytime Tele	3 8 6 5 ephone Number
Enclosed is a check for the fo	ollowing amount:		
S25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	2 \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sundial Digital Mame of the Limited Liability Compa (A Florida Limited I	Marketivo  unvasit now appears on our tool  Liability Company)	$\frac{LLC}{\text{rds.}}$
The Articles of Organization for this Limited Liability Company Florida document number <u>L 2 4 0 00 3 <b>9 9 2</b> 7</u> 9		- 2 4 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab  Prospective Digital  The new name must be distinguishable and contain the words "Limited Liabiletics".		.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		2024
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		FILED  OCT 24 PHIZ: 41  AHASSEE FLORIDA
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ente</u>	r the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	
	, F	loridaZin Code
	<del>or.</del>	say. Come

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

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
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			□Add
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•		<u> </u>	
(If an et Note:	ive date, if other than the date of filing:  (optional fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. If the date inserted in this block does not meet the applicable statutory filing requirements, this date that it is effective date on the Department of State's records.	g.) Pursuant to 605	
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m 90th day after the record is filed.	. on the earli	er of:
Dated	October 16. 2024		
	Veclor Brandon Denney  Signature of a member or authorized representative of a member		
	Verlor Brandon Denney Typed or printed name of signee		

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Filing Fee: \$25.00