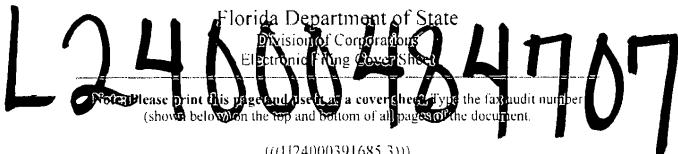
11/25/24, 3/32 PM

Division of Comorations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)389-0502

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

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Help

Tallahassee, FL 32314

From: Rajiv Srivastava

COVER LETTER

TO: Registration Se Division of Con			
GLINSTIT	TUTE LLC		
SUBJECT:	Name of Limit	ted Liability Company	
	Amendment and fee(s) are subm	-	
Please return all correspo	ondence concerning this matter t	o the following:	
	Mike Town		
	,	Name of Person	<u></u>
	Legalzoom, com, Inc.		2021
		Firm'Company	- 3 5 71
	9900 Spectrum Dr		N
		Address	- 80 p 111
	Austin, TX 78717		2024 NOV 26 PM 4: 43
		City/State and Zip Code	一 行語 53
	miakji@gmail.com		
For further information c	e-mail address (of	o be used for future annual report notification)	
Mike Town	, , , , , , , , , , , , , , , , , , , ,	800 773-0888	
	of Person	nt () Area Code Daytime Telephone No	imbei
Enclosed is a check for t	_		
□ \$25 00 Filing Fee	□ \$30 00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	00 Filing Fee. hiticate of Status & hited Copy hitonal copy is enclosed)
Regist	ING ADDRESS: ration Section on of Corporations	STREET/COURIER ADDRES Registration Section Division of Corporations	SS:
	ox 6327	Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

To: Page: 39 of 51 2024-11-25 16:36:59 PST 13236068205 From: Rajiv Srivastava

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company	were filed on 11/15/2024	and assigned	
Florida document number 1.24000484707			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial	pility company here:		
The new name must be distinguishable and contain the words "Limited Liab	this Company," the designation "LLC" or	the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	255 Grialda Ave., 5th floor		
(Principal office address MUST BE A STREET ADDRESS)	Coral Gables, FL 33134	<u> </u>	
		V 4000	
Enter new mailing address, if applicable:	255 Giralda Ave , 5th floor	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)	Coral Gables, FL 33134		
		出 43	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	-	inter the name of the no	
	_		
Name of New Registered Agent:			
New Registered Office Address:			
vew Registered Office Auditess.	Enser Florida street address		
	, Florida		
	Ciţy	Zip Cock	
New Registered Agent's Signature, if changing Registered Agent:			

If Changing Registered Agent, Signature of New Registered Agent

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, enter the title, name, and address of each person-being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u> Name</u>		<u>Address</u>	Type of Action			
AMBR	Sungahul Ji					
			☐ Remove			
		255 Giralda Ave., 5th floor Coral Gubles, FL 33134				
AMBR	Sayer Ji					
			☐ Remove			
		255 Giralda Ave , 5th floor Coral Gables, FL 33134	■ Сћапде			
AMBR	Mia Ji		20E			
			NOVE 6 P			
		255 Giralda Ave., 5th floor Coral Gables, FT, 33134	Change Line Change			
			□ Remove			
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ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date (c) If the date inserted in this block does not meet the applicable st nument's effective date on the Department of State's records	tatutory filing rec	urrements, this d	ing.) Pursuar	it to 605 be liste
record specifies a delayed effective date, but not an element he 90th day after the record is filed.	effective time	, at 12:01 a.r	n. on the	earlie
ed				
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/S/ Mia Ji Signature of a member or authorized i				

Page 3 of 3

Filing Fee: \$25.00