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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 : (844)449-3624 Fax Number : (512)597-0678

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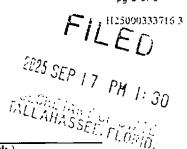
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Help

K. SALY SEP 18 2025

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Finsity LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 12/02/2024 and assigned Florida document number <u>1.24000502689</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C" 2384 Stockwood Trl Enter new principal offices address, if applicable: Thompsons Station, TN 37179 (Principal office address MUST BE A STREET ADDRESS) US 2384 Stockwood Trl Enter new mailing address, if applicable: Thompsons Station, TN 37179 (Mailing address MAY BE A POST OFFICE BOX) US B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 hability company has been notified in writing of this change.

City

It Changing Registered Agent, Signature of New Registered Agent

_. Florida ____

MGR = Manager

5125970678

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our encount. or removed from our records:

AMBR = .	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			Remove
			□Change
			
			□Remove
			□Change
			Dadd 7 St. Do. B.
			Charles 1:30
			□Remove
			□Change
			🗀 Add
			□Remove
			Change
			5bA.□
			☐Remove
			□Change

5125970678

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		, on the earlier of: (b) The 90th day after the
ctive date, if other than the d effective date is listed, the date miss l if the date inserted in this bloc ment's effective date on the Dep	e specific and cannot be prior to date of filing or k does not meet the applicable statutory fili	(optional) more than 90 days after filing) Pursuant to 695 0207 ing requirements, this date will not be listed as
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		MASEP 17 PA

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