<u>,</u>		
MI5000	04619	
(Requestor's Name) (Address) (Address)	900347723699	
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	<b>FILED</b> 2020 JUL 23 PH I2: 43	
Special Instructions to Filing Officer:	120 JUL 23 PH 12: 1: 7	

JUL 2 4 2020 S. YOUNG



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: 12000000088 July 23, 2020 Date:\_\_\_ **CHRIS VICK** Name:\_\_\_ 1244785 Reference #:\_\_\_\_ **RT1 NATIONAL SERVICES, LLC** Entity Name:\_\_\_\_ Articles of Incorporation/Authorization to Transact Business Amendment Change of Agent **ISSUES? CALL** Reinstatement KEN: 518-213-0738 ] Conversion Merger Dissolution/Withdrawal Fictitious Name \_\_\_ Other \_\_\_\_\_\_

Authorized Amount: \$25-

 CORPORATE HQ COGENCY GLOBAL INC. 10 E 40 ST. 10 FL NY, NY 16016 800.221.0102 +1.212.947.7200  EUROPEAN HQ
 COGENCY GLOBAL (UK) LIMITED REGISTERED JENGLAND & WALES REGISTRED JENGLAND & WALES REGISTRED JENGLAND & WALES LONDON ECIA 7BA +44 (0)20.3786.1090 ASIA PACIFIC HQ
 COGENCY GLOBAL (HK) LIMITED
 A HONG KONG LIMITE COMPANY
 INFENITUS PLAZA, 12<sup>th</sup> FL
 199 DES VOEUX RO CENTRAL
 HONG KONG
 +852,3975,1803

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

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State: R1	T1 NATIONAL SERVICES, LLC
Enter new principal office address, if applica	ible:
( <u>Principal office address</u> MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: ( <u>Mailing address</u> <u>MAY BE A POST OFFICE BOX</u> )	
2. The Florida document number of this limi	ted liability company is: M15000004619
5 Jurisdiction of its organization:	DE
4. Date authorized to do business in Florida	6/11/2015
SECTION II (5-9 complete only the appli	cable changes)
5. New name of the limited liability compar	ny: VENTURI NATIONAL SERVICES. LLC (must contain "Limited Liability Company, " "L.L.C.," or "LLC.")
	(must contain "Limited Liability Company, " "L.L.C.," or "LLC.")
copy of the written consent of the managers must contain "Limited Liability Company,"	gistered officer address on our records, enter the name of the new
New Registered Office Address:	Enter Florida Street Address
	, Florida City Zip Code
	City Zip Code

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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

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8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

Title/ Capacity	Name	Address	Type of Action
			Add
			Remove
	·····	<u>_,,_,_</u> ,,_,,,,,,,_	····· ·Add
		Remove	
			Add
			Remove
		<u></u>	,Add
			,Remove
	<u></u>		Add
			Remove
aforementioned	ertificate, if required: no more than 90 I amendment(s), duly authenticated by ler the law of which this entity is orga Signature of	the official having custody of reco	rds in the
	CrueTuro D'	ANG need name of signee	

Filing Fee: \$25.00



Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "RT1 NATIONAL SERVICES, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "VENTURI NATIONAL SERVICES, LLC" ON THE SEVENTEENTH DAY OF JULY, A.D. 2020, AT 12:49 O'CLOCK P.M.



Authentication: 203326510 Date: 07-22-20

5708143 8320 SR# 20206350935

You may verify this certificate online at corp.delaware.gov/authver.shtml