## MI7000000741

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2022 OCT 20 FH 3: 48

A. BUTLER

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## **COVER LETTER**

TO:	Registration Se Division of Cor					
CHD ICA		DISCIDIUM BIOSCIENCES, LLC  Name of Limited Liability Company				
SUBJEC	∪I:					
The enc!	osed Articles of	Amendment and fee(s) are sub	nitted for filing.			
Please re	cturn all correspo	ndence concerning this matter	to the following:			
		Diane M. Hernandez				
		-	Name of Person			
		Adams Gallinar, P.A.				
			Firm/Company	<del></del>		
		1000 Brickell Avenue, Suit	ee 300			
		Address				
	Miami, Florida 33131					
		City/State and Zip Code				
		dhernandez@agilaw.com	to be used for future annual report not	ification)		
For furth	her information c	oncerning this matter, please co				
Diane M	4. Hernandez		305 416-6800 at (			
	Name o	f Person		ne Telephone Number		
Enclose	d is a check for th	he following amount:				
■ \$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$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		Street Address: Registration Se			
	Division of C	Corporations	Division of Co	rporations		

P.O. Box 6327

Tallahassee, FL 32314

**Division of Corporations** 

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	SCIENCES, LLC 2022 OCT 20 PH 3: 48	
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number M1700000741	were filed on January 26, 2017 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
•	2690 Hilola Street	
Enter new principal offices address, if applicable:	Coconut Grove, Florida 33133	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	2690 Hilola Street	
(Mailing address MAY BE A POST OFFICE BOX)	Coconut Grove, Florida 33133	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
<del></del>	City Zip Code	

## 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 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>Title</u>	Name	<u>Address</u>	Type of Action
MGR	Dr, Mario Stevenson	2690 Hilola Street	<b>≣</b> Add
		Coconut Grove, Florida 33133	□Remove
			□ Change
AMBR	Credit Karma, Inc.	760 Market Street	
		Attn: Adrian Lee	■Remove
		San Francisco, CA 94102	
			□Add
			Change
			□Add
			□Remove
			□Change
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			□Remove
			Change
			□Remove
			□ Change

. If amending	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
	<del></del>
<del></del>	
<u>-</u>	
(If an effective da Note: If the d	e, if other than the date of filing:
ne record specif ord is filed.	fies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	$\frac{\sqrt{2022}}{\sqrt{2022}}$
	Signature of a member or authorized representative of a member
	17 Signature of a member of authorized representative of a member
Ro	bert R. Adams, Authorized Signatory
	Typed or printed name of signee