

117000009728

Florida Department of State
Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To:

Division of Corporations
Fax Number : (850) 617-6393

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000030023
Phone : (614) 280-3338
Fax Number : (954) 293-0945

Please honor original
date 08/30/2021

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BEACON SOFTWARE LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

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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

State: BEACON SOFTWARE LLC

Enter new principal office address, if applicable: 10091 Brecksville Rd. Ste. F

(Principal office address
MUST BE A STREET ADDRESS) Brecksville, OH 44141

Enter new mailing address, if applicable:

(Mailing address
MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M17000009728

3. Jurisdiction of its organization: Louisiana

4. Date authorized to do business in Florida: 11/15/2017

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "LLC," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "LLC," or "LLC.")

6. If amending the registered agent and/or registered officer 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: NRAI Services, Inc.

New Registered Office Address: 1200 South Pine Island Road

Enter Florida Street Address

Plantation, Florida 33324
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.

NRAI Services, Inc. by Kaity Toon, Asst. Sect.

If Changing Registered Agent, Signature of New Registered Agent

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

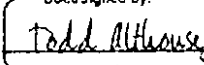
8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

The Authorized Persons are being amended as noted below:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
CEO	Rudy Smith	425 N CLAIRBORNE AVE	☐ Add
		NEW ORLEANS, LA 70112	☒ Remove
CEO	Jeff Pesnell	10091 Brecksville Rd. Ste. F	☒ Add
		Brecksville, OH 44141	☐ Remove
VP, Secretary, Treasurer	Matt Guimbarda	10091 Brecksville Rd. Ste. F	☒ Add
		Brecksville, OH 44141	☐ Remove
VP of Development	Aleksander Petkovic	10091 Brecksville Rd. Ste. F	☒ Add
		Brecksville, OH 44141	☐ Remove
			☐ Add
			☐ Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

DocuSigned by:



7892637003430417

Signature of the authorized representative

Todd Althouse

Typed or printed name of signer

Filing Fee: \$25.00