

M21000003841

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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AND
FILED

2022 SEP - 7 AM 9:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE

SEP - 8 2022

Brumbley



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 09/07/2022

Name: Chris Vick

Reference #: 1770142

Entity Name: GENPACT MANAGEMENT CONSULTANTS, LLC

☐ Articles of Incorporation/Authorization to Transact Business

☒ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

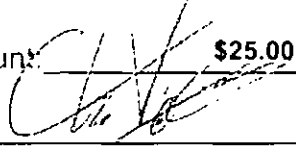
☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

Authorized Amount: \$25.00

Signature: 

**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: BARKAWI MANAGEMENT CONSULTANTS, LLC

Enter new principal office address, if applicable: _____

(Principal office address
MUST BE A STREET ADDRESS)

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: M21000003841

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 03/29/2021

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

5. New name of the limited liability company: GENPACT MANAGEMENT CONSULTANTS, LLC
(must contain "Limited Liability Company," "L.L.C." 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," "L.L.C." 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: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, **Florida** _____
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 Changing Registered Agent, Signature of New Registered Agent

APPROVED
AND
FILED

2022 SEP -7 AM 9:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

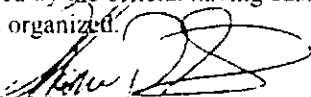
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

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

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
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		_____	<input type="checkbox"/> Remove
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		_____	<input type="checkbox"/> 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.



Signature of the authorized representative

Thomas D. Scholtes

Typed or printed name of signee

Filing Fee: \$25.00


Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "BARKAWI MANAGEMENT CONSULTANTS, LLC", CHANGING ITS NAME FROM "BARKAWI MANAGEMENT CONSULTANTS, LLC" TO "GENPACT MANAGEMENT CONSULTANTS, LLC", FILED IN THIS OFFICE ON THE THIRTIETH DAY OF AUGUST, A.D. 2022, AT 12:33 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE THIRTIETH DAY OF AUGUST, A.D. 2022 AT 2:01 O'CLOCK P.M.



Jeffrey W. Bullock, Secretary of State

4772002 8100
SR# 20223397428

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

Authentication: 204280758
Date: 08-30-22

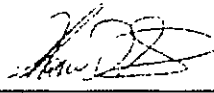
CERTIFICATE OF AMENDMENT
OF
BARKAWI MANAGEMENT CONSULTANTS, LLC

FIRST: The name of the limited liability company is BARKAWI MANAGEMENT CONSULTANTS, LLC.

SECOND: The Certificate of Formation of the limited liability company is hereby amended to read as follows: "First: The name of the limited liability company is Genpact Management Consultants, LLC."

THIRD: This Amended Certificate of Formation shall become effective on August 30, 2022 at 2:01 p.m. Eastern Standard Time.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Amendment as of the 30th day of August, 2022.

By: 
Thomas D. Scholtes
Authorized Person