

M2100000141321

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

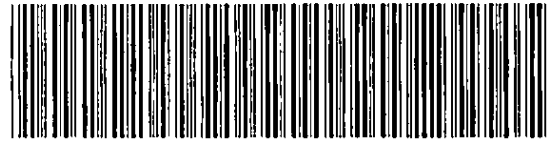
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Q. SILAS
MAY 13 2022

Office Use Only



400387274974

FILED

SECRETARY OF STATE
TALLAHASSEE, FL

2022 MAY 12 PM 9:25

RECEIVED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 MAY 12 PM 12:03



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

Account#: I20000000088

Date: 05/11/2022

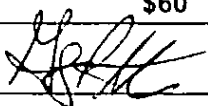
Name: Greg Pintacuda

Reference #: 1684277

Entity Name: OTCIS LLC

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☒ Amendment
- ☐ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☒ Other APON FILING PROVIDE CERTIFIED COPY AND GOOD STANDING

Authorized Amount: \$60

Signature: 

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OTC Investment Solutions, L.L.C.

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maria Paula Souza

Name of Person

Accelerate Legal, Inc.

Firm/Company

151 Arkansas Street, Unit A

Address

San Francisco / CA 94107

City/State and Zip Code

maria@acceleratelegal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria Paula Souza _____ at (415) _____ 8402307 ext 710
Name of Person Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

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

7/27/2021 MAY 12 PM 9:25

SECTION I (1-4 must be completed) SECRETARY OF STATE
TALLAHASSEE, FL

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

State: OTC INVESTMENT SOLUTIONS, L.L.C.

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: M21000014321

3. Jurisdiction of its organization: DELAWARE

4. Date authorized to do business in Florida: OCTOBER 27, 2021

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

5. New name of the limited liability company: OTCIS 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.

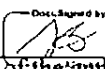
If Changing Registered Agent, Signature of New Registered Agent

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:

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

DocuSigned by


Signature of the authorized representative
MATIAS DAJCZ

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 "OTC INVESTMENT
SOLUTIONS, L.L.C.", CHANGING ITS NAME FROM "OTC INVESTMENT
SOLUTIONS, L.L.C." TO "OTCIS LLC", FILED IN THIS OFFICE ON THE
SECOND DAY OF MAY, A.D. 2022, AT 4:24 O'CLOCK P.M.



7197526 8100
SR# 20221730718

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

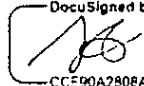
Authentication: 203327816
Date: 05-03-22

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

1. Name of Limited Liability Company: OTC Investment Solutions,
L.L.C.
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The name of the limited liability company is OTCIS LLC.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 26 day of April, A.D. 2022.

By: 
Authorized Person(s)

Name: Matias Dajcz
Print or Type