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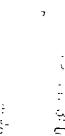
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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 01/19/2023	_		⇔WALK IN™
ENTITY NAME_MAVR	C, LLC		
DOCUMENT NUMBER_			
	PLEASE FILE 1	THE ATTACHED AND RETURN	
XXXXX	Plain Copy		
	Certified Copy		
 	Certificate of Status		
	Certified Copy of Ar Certificate of Good S		
	APOSTILLE'/	NOTARIAL CERTIFICATION	_ <u>_</u>
COUNTRY OF DESTINA			_
NUMBER OF CERTIFICA	TES REQUESTED		-
TOTAL OWED \$25		ACCOUNT #: I20160000072	
		5 8 FM	
Places well Time at 1	the chang unwher kar	any issues or concerns. Thank you so m	nek!

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 I	Department of	
State: MAVRC, LLC		-1	
Enter new principal office address, if applicable:		,	
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SECRETARY TALLARY	2023 JAN 19
2. The Florida document number of this limited liab	oility company is: M22000001	357	
3. Jurisdiction of its organization: Delaware			20
4. Date authorized to do business in Florida: 1/27/2			
SECTION II (5-9 complete only the applicable cl	hanges)		
5. New name of the limited liability company: MA (must o	AVRYC, LLC contain "Limited Liability Cor	npany, ""L.L.C" or "l	
(If name unavailable, enter alternate name adopted to copy of the written consent of the managers or mana- must contain "Limited Liability Company." "L.L.C.	iging members adopting the al	ousiness in Florida and a ternate name. The altern	Itach a ate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office add	l officer address on our records lress here:	s, enter the name of the r	<u>tew</u>
Name of New Registered Agent:			
New Registered Office Address:	Enter Florido	ı Street Address	
	·	Florida	
	City	Fiorida Zip Còde	?

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.

DocuSign Envelope ID: 9D921335-3597-4352-8962-699B7E97E3DB

8. If the amendment c	hanges person, title or capacity in	accordance with 605.0902 (1)(e), indicate	e that chan	āc:
Title/ Capacity	Name	Address	Type	of Action
				□Add
				□Remove
				□Add
				□Remove
				□Add
				□Remove
				□Add
				□Remove
				□Add
	icate, if required: no more than 9	00 days old, evidencing the by the official having custody of records in	in the	□Remove
jurisdiction under t	he law of which this entity is org	of the authorized representative	SECRETA TALLA	2023 JAN 19
		riff, MD	AR)	9

Filing Fee: \$25.00

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "MAVRC, LLC", FILED A

CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "MAVRYC, LLC" ON

THE SEVENTEENTH DAY OF JANUARY, A.D. 2023, AT 2:07 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MAVRYC, LLC"

WAS FORMED ON THE TWELFTH DAY OF JANUARY, A.D. 2022.



Authentication: 202529165

Date: 01-19-23

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