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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 38677.1 8020289
AUTHORIZATION: Spielle Read
COST LIMIT : \$ 25.00
ORDER DATE : January 19, 2023
ORDER TIME : 12:15 PM
ORDER NO. : 386771-010
CUSTOMER NO: 8020289
FOREIGN FILINGS
NAME: HOMELAND.AI LLC
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY
XXXX AMENDMENT
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Alexxis Weiland -- EXT#

COVER LETTER

	gistration Section rision of Corporations				
	on or corporations				
SUBJECT					
	Name of For	reign L	imited Liab	ility Cor	mpany
Dear Sir or	Madam:				
The enclose	ed application, certificate and fee	(s) are	submitted f	or filing	j.
Please retur	m all correspondence concerning	this m	natter to the	followir	ng:
Camila Rive	ero-Fernandez				
	Name of Person			•	
RC Law LLI	P				
	Firm/Company			-	
175 SW 7th	Street, Suite 1712				
	Address				
Miami, FL 3	3130				
	City/State and Zip Co	ode			
camila.river	o@rclawllp.net				
E-mail ac	Idress: (to be used for future annual	ual rep	ort notificat	ion)	
For further	information concerning this matt	ter inle:	ase call:		
	6				
	Name of Person	at (Area Code	& Dayti	ine Telephone Number
Mail	ling Address:			Street Ac	idress:
Registration Section				Registration Section	
Division of Corporations				Division of Corporations	
P.O	. Box 6327				nire of Tallahassee
Tall	ahassee, FL 32314			2415 N.	. Monroe Street, Suite 810 ssee, FL 32303
Enc	losed is a check for the following	nu eer	ouat:		
□S25 Filing	g Fee S30 Filing Fee &		S55 Filing F	r.	C SAO EDILLA E L.
· mil	Centificate of Status		Centified Co		Certificate of Status & Certified Copy
CREFOSS (9/15	a				commen copy

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 reco	rds of the Florida Department of
State: HOMELAND.ALLIC	
Description of the state of the	1,471 1,521
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address) MAY RE A POST OFFICE POY	
2. The Florida document number of this limited liability compa	ny is: M22000008399
3. Jurisdiction of its organization: Delaware	
4. Date authorized to do business in Florida: 05/27/2022	
SECTION II (5-9 complete only the applicable changes)	
 New name of the limited liability company: Sigma Al Groundst Contain "Line 	nited Liability Company, ""L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpo copy of the written consent of the managers or managing memb must contain "Limited Liability Company," "L.L.C." or "L.L.C."	ent adopting the alternate some. The alternate are
6. If amending the registered agent and/or registered officer add registered agent and/or the new registered office address here:	ress on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent the appointment as registered agent and agree to the proper and complete and accept the obligations of my position as registered agent as document is being filed to merely reflect a change in the register liability company has been notified in writing of this change.	o act in this capacity. I further agree to comply with performance of my duties, and I am familiar with personal for in Chapter 605, U.S. (Co. 1881).
16 Changle D. C.	

. If the amendment changes person, title or capacity in accordance with 605,0902 (1)(e), indicate that change:						
itle/ Capacity	Name	Address	Type of Action			
			Remov			
			🗆 Add			
			□Remov			
			DAdd			
			□Remov			
			□Remov			
 			□Add			
atorementioned ame	le law of which this entity is orga	y the official having custody of records in the	□Remov			

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 "HOMELAND.AI LLC",

FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "SIGMA AI

GROUP LLC" ON THE NINETEENTH DAY OF JANUARY, A.D. 2023, AT 1:47

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.



Authentication: 202539050

Date: 01-20-23