# M23000011659

(f	Requestor's Name)
	Address)
	Address)
	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(8	Business Entity Name)
(C	Document Number)
Certified Copies	Certificates of Status
Special Instructions to Fi	iling Officer:

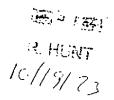
Office Use Only



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### **CT CORP**

#### (850) 656- 4724 3558 lakesore Drive Tallahassee, FL 32312

10/19/2023

Ref#

Da	ate:	10/19/2023		a: DW	
		Acc#I20160000	072	4:C) JV	
Name:	TMT 461	1-4661 Lyons Tech	Parkway, L	.LC	
Document #:			·	-	
Order #:	1518079	1			
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:					0 1715 Oct 0
Certified Copy of					<b>9</b> C
Apostille/Notarial Certification:		Country of Destinat  Number of Certs:	on:		S SALE SALE SALE SALE SALE SALE SALE SAL
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Availability  Document  Examiner  Updater  Verifier  W.P. Verifier	Amou	nt: \$ 55.00			

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

#### SECTION I (I-4 must be completed)

State: TMT 4611-4661 Lyons Tech Parkway, L  Enter new principal office address, if applicable:	4 Embarcadero Center, Suite 3300				
( <u>Principal office address</u> MUST BE A STREET ADDRESS)	San Francisco, CA 94111				
Enter new mailing address, if applicable:	4 Embarcadero Center, Suite 3300				
( <u>Mailing address</u> <u>MAY BE A POST OFFICE BOX</u> )	San Francisco, CA 94111				
2. The Florida document number of this limited F	iability company is:	— —			
Jurisdiction of its organization: Delaware		61 170 6707			
4. Date authorized to do business in Florida: 9/1	2/2023				
SECTION II (5-9 complete only the applicable	e changes)				
SECTION II (5-9 complete only the applicable changes)  . New name of the limited liability company:  (must contain "Limited Liability Company, ""L.L.C.," or "LLC.")					
(If name unavailable, enter alternate name adopte copy of the written consent of the managers or manust contain "Limited Liability Company," "L.L.	ed for the purpose of transacting business in Florida and atta anaging members adopting the alternate name. The alterna C." or "LLC.")	ich a e na			
6. If amending the registered agent and/or registe registered agent and/or the new registered office is	red officer address on our records, enter the name of the ne	W			
Name of New Registered Agent:	<del></del>				
New Registered Office Address:	Enter Florida Street Address				
	, Florida				

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

Title/ Capacity	Name	Address	l'ype of Action
Vice Pres	Kevin Dolan	4 Embarcadero Center, Suite 3300	<b>=</b> Add
		San Francisco, CA 94111	□Remo
			□Add
			□Remo
			2∰3 OCT
			□Rono
			PH 12: ₹0
			□Remo
			□Add
aforementio	a certificate, if required: no more that ned amendment(s), duly authenticate under the law of which this entity is	ed by the official having custody of records in the	□Remo
	/s/Kevin Dolan	re of the authorized representative	

C'' C 636.00