COVER LETTER

Registration Section Division of Corporations

TO:

COVEX 20 SUBJECT:	020, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Christopher Malter		
		Name of Person	
	Global Accelerated Ventur	res, LLC	
		Firm/Company	
	2087 Augusta		
		Address	
	Weston, Florida 33326		
		City/State and Zip Code	
	cm@gaventures.co		
	E-mail address: (to be used for future annual report noti	fication)
For further information of	concerning this matter, please c	all:	
Christopher Malter		954 629-2036 at ()	
Name o	of Person		ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of O P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Con The Centre of T 2415 N. Monro Tallahassee, FI	rporations Fallahassee ee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COVEX 2020, LLC

(A Florida I	Limited Liability Company)	<i>ل</i>
The Articles of Organization for this Limited Liability Con Florida document number <u>L20000088461</u>	mpany were filed on 03/24/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
AVALON.AI LLC		
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:	office address on our records, <u>enter t</u>	he name of the new register
New Registered Office Address:		
	Enter Florida street address	
	, Flo	rida Zip Code
New Registered Agent's Signature, if changing Registered		
I hereby accept the appointment as registered agent as provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	nd agree to act in this capacity. I fur mplete performance of my duties, an ent as provided for in Chapter 605, F	d I am familiar with and F.S. Or, if this document is
	If Changing Registered Agent, Signature of	f New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			Change

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). II amei	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note: I	August 2nd, 2020 (optional) etive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(1) of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nt's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated _	august 2nd 2020
	Signature of a member or authorized representative of a member
	Christopher Malter
	Typed or printed name of signee

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Filing Fee: \$25.00

Electronic Articles of Organization For Florida Limited Liability Company

L20000088461 FILED 8:00 AM March 24, 2020 Sec. Of State

Article I

The name of the Limited Liability Company is: COVEX 2020, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

2087 AUGUSTA WESTON, FL. 33326

The mailing address of the Limited Liability Company is:

2087 AUGUSTA WESTON, FL. 33326

Article III

Other provisions, if any:

COVEX 2020 IS AN AI-TECHNOLOGY

Article IV

The name and Florida street address of the registered agent is:

GLOBAL ACCELERATED VENTURES 2087 AUGUSTA WESTON, FL. 33326

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: CHRISTOPHER MALTER

Article V

The name and address of person(s) authorized to manage LLC:

Title: MGR GLOBAL ACCELERATED VENTURES 2087 AUGUSTA WESTON, FL. 33326 L20000088461 FILED 8:00 AM March 24, 2020 Sec. Of State msimmons

Article VI

The effective date for this Limited Liability Company shall be:

03/24/2020

Signature of member or an authorized representative

Electronic Signature: CHRISTOPHER MALTER

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.