o

Н

W

LLC-6

For Office Use Only

## -FILED-

File No.: BA20241513002 Date Filed: 8/19/2024

Must be submitted with a current certificate evidencing the name change issued by the government agency where the LLC was formed.

Filing Fee - \$30.00

Certification Fee (Optional) - \$5.00

**Note:** You must file a Statement of Information (Form LLC-12) to change the LLC's business address(es), or to change the name or address of the LLC's agent for service of process. Statements of Information (Form LLC-12) can be filed online at <a href="mailto:bizfileOnline.sos.ca.gov">bizfileOnline.sos.ca.gov</a>.

Above Space For Office Use Only

1. LLC Exact Name Used in California (Enter the name used in California exactly as listed on the records of the California Secretary of State.)

## MGT of America Consulting, LLC

2. LLC (File) Entity Number (Enter the exact Entity (File) Number issued by the California Secretary of State.)

2 0 1 6 2 1 1 1 0 4 6 8

3. New LLC Name in the State, Country, or Other Place of LLC Formation (If the LLC changed its name in the jurisdiction of formation, list the new LLC name as listed on your attached certificate evidencing the name change.)

## MGT Impact Solutions, LLC

4. California Alternate Name, if Required (Complete either 4a, 4b, 4c)

4a	a. List an alternate name to be used in California if: (1) the LLC name in Item 3 does not comply with California naming requirements or
	(2) you only are filing this form to change an existing alternate name used in California. List the alternate name exactly as it is to
	appear on the records of the California Secretary of State.
	**

4b. Check this box if you completed Item 3, above and if applicable. If you check this box, do not complete Item 4a above or 4c below.

☐ This LLC registered in California before January 1, 2014; currently transacts intrastate business in California under the alternate name listed in Item 1 above; and upon this filing, will continue to transact intrastate business in California under the alternate name listed in Item 1 above.

4c. If you check this box, do not complete Item 4a or 4b above.

Check this box if you are relinquishing the California alternate name.

## Signature

By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized to sign on behalf of the foreign LLC.

Additional signatures set forth on attached pages, if any, are incorporated herein by reference and made part of this Form LLC-6. (All attachments should be 8 ½ x 11, one-sided, legible and clearly marked as an attachment to this Form LLC-6.)

Type or Print Name

A. Trey Traviesa

Bepartment of State

I certify from the records of this office that MGT OF AMERICA CONSULTING, LLC which changed its name to MGT IMPACT SOLUTIONS, LLC, is a limited liability company organized under the laws of the State of Florida, filed on December 2, 2015.

The document number of this company is L15000199435.

I further certify that said company has paid all fees due this office through December 31, 2023, that its most recent annual report was filed on February 25, 2023, and its status is active.

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes and authenticated by the code, 024A00018018-081424-L15000199435-1/1, noted below.

I further certify that said limited liability company has not filed Articles of Dissolution.

Authentication Code: 024A00018018-081424-L15000199435-1/1



Given under my hand and the Great Seal of the State of Florida, at Tallahassee, the Capital, this the Fourteenth day of August, 2024

Secretary of State