

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** COVEX 2020, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher Malter

\_\_\_\_\_  
Name of Person

Global Accelerated Ventures, 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 notification)

For further information concerning this matter, please call:

Christopher Malter

954

629-2036

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the 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 Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

COVEX 2020, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 03/24/2020 and assigned  
Florida document number L20000088461.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

AVALON.AI LLC

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_

*Enter Florida street address*

\_\_\_\_\_, **Florida**

*City*

*Zip Code*

**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.*

If Changing Registered Agent, Signature of New Registered Agent

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

[illegible]

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**E. Effective date, if other than the date of filing:** August 2nd, 2020 (optional)

(If an effective 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)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated August 2nd, 2020

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Signature of a member or authorized representative of a member

Christopher Malter

Typed or printed name of signee

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

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

**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.