

State of Rhode Island Department of State - Business Services Division

REC'D RIDOS 850 15 FEB 20 9x8:20:4 20 25 FEB 17 9x1:48:2:2

Amendment to Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL <u>7-16-52</u> the undersigned foreign limited liability company hereby amends its Application for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

	duffiles the following statement:		
1. Entity ID Number:	2. The name of the limited liability	company is:	
001759012	C3 Ventures LLC		
3. If the entity's name is changing, state the new name:	Kodiak Solutions LLC	Cheek the hey to indicate no change	
		Check the box to indicate no change	
3a. The entity's name, if different, under which it proposed to register transact business in Rhode Island i	s:		
4. If the period of duration has char	nged in the home state, complete t	he following section: CHECK ONE BOX ONLY	
Perpetual (on-going)	<u> </u>		
, , , , ,			
Date certain for dissolution		Check the box to indicate no change X	
the following section:		country of its organization has changed, complete Check the box to indicate no change	
6. If the mailing address is changing complete the following section:			
		Check the box to indicate no change X	
7. If the entity's purpose is changin transacted in the State of Rhode Island		*The new purpose should include ALL activity to be	
	nment	Check the box to indicate no change $ imes$	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED, TA: 4'-

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8. If the management structure ha	s changed, complete the following section:	
The Limited Liability Company is t	o be managed by: CHECK ONLY ONE BOX	
	necked this box, skip to Section 9. DO NOT fill out the	chart on the next page.)
One (1) or more manager(s) to the Application for Registra	(If the limited liability company has manager(s) at the tation, state the name and address of each manager.)	ime of the filing of this Amendment
MANAGER	ADDRESS	
	Chec	k the box to indicate no change X
9. As required by RIGL <u>7-16-67</u> , t	he limited liability company has paid all fees and taxes	
10. Except as herein modified, the	e original Application for Registration continues in full fority, by reference into this Amendment to the Application	orce and effect and is hereby on for Registration.
11. Date when this Amendment to	the Application for Registration will be effective: CHE	CK ONE BOX ONLY
X Date received (Upon filing)	ust be no more than 90 days from the date of filing)	
Under penalty of perjury, I declare including any accompanying atta	e and affirm that I have examined this Amendment to the chments, and that all statements contained herein are	ne Application for Registration, true and correct.
Type or Print Name of Limited Liabilit		Date
C3 Ventures LLC		02/13/2025
Signature of Authorized Person		
Lava Korosec	Kara Korosec, Attorney-in-Fact	