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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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Account Name : R&P ACCOUNTING AND TAXES INC

Account Number : I20170000090 ; (305)358-1310 Phone

Fax Number

: (305)503-6701

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February 14, 2020

FLORIDA DEPARTMENT OF STATE Division of Corporations

BETECH TRADE LLC 95-19 SUTPHIN BLVD JAMAICA, NY 11435US

SUBJECT: BETECH TRADE LLC

REF: L14000127863

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker Regulatory Specialist III

FAX Aud. #: H20000050226 Letter Number: 320A00003373

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BETECH TRADE LLC						
(Name of the Limi	ted Liability Compa (A Florida Limited	inv as it now appears o Liability Company)	n our records.)			
The Articles of Organization for this Limited I Florida document number L14000127863	iability Company.	were filed on 08/14	/2014		signed	
This amendment is submitted to amend the fol	lowing:			SECRE SECRE	2020 FEB 17	
A. If amending name, enter the new name of	of the limited liab	oility company here	:		817	Total Control
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desi	gnation "LLC" or the a	mbréviation "l	L.Z	—; -
Enter new principal offices address, if appli	cable:	150 SE 2ND AVE	SUITE 404		<u></u>	
(Principal office address MUST BE A STREE		MIAMI, FL 33131			3	_

Enter new mailing address, if applicable:		150 SE 2ND AVE	SUITE 404	<u>.</u>		_
(Mailing address MAY BE A POST OFFICE BOX)		MIAMI, FL 33131				
B. If amending the registered agent and/or agent and/or the new registered office address.	ess here:	address on our reconstructions		me or the ne	w regis	<u>ster cu</u>
Name of New Registered Agent:	150 CE 2N'D A	VE SUITE 404				
New Registered Office Address:	130 3E 2ND A		street address			_
	MIAMI		, Florida <u>}</u>	3131		
		City		Zip Code		
New Registered Agent's Signature, if changing I hereby accept the appointment as register provisions of all statutes relative to the pro- accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	ed agent and agr per and complete sistered agent as registered office s change.	ree to act in this ca performance of m provided for in Ch	y duties, and I am apter 605, F.S. Or confirm that the l	gamitiar w r, if this doc imited liabi	un ana rument lity	

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	РКАВНАТ КОСННАК	150 SE 2ND AVE SUITE 404	□Add
		MIAMI, FL 33131	Remove
			Ghange 2020 FE
			Change 2020 FEB 17e PM 12g 33
		□Add	FF W
			□ Rensive
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locument's effective date on the	: Department of S	state's records.				
record specifies a delayed effec	nive date, but not	an effective tit	ne. at 12:01 a.m	, on the earlier of:	(b) The 90th d	lay after the
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