



## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 3C TECHNOLOGY SOLUTIONS 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:

JOSE A CUESTA Jr.

Name of Person

Firm/Company

8781 NW 12 ST

Address

PEMBROKE PINES, FL 33024

City/State and Zip Code

3ctechsolutions@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE A CUESTA Jr. at ( 786 ) 472-0982  
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

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

3C TECHNOLOGY SOLUTIONS LLC

2019 AUG -1 @ 5:25

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 01/22/2019 and assigned Florida document number L19000021274.

This amendment is submitted to amend the following:

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

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:

8781 NW 12 ST

**(Principal office address MUST BE A STREET ADDRESS)**

PEMBROKE PINES, FL 33024

Enter new mailing address, if applicable:

8781 NW 12 ST

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

PEMBROKE PINES, FL 33024

**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:

JOSE A CUESTA Jr

New Registered Office Address:

8781 NW 12 ST

*Enter Florida street address*

PEMBROKE PINES

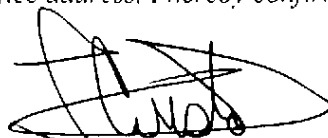
, Florida 33024

*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**

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>	<u>Address</u>	<u>Type of Action</u>
MGR	ANGEL CRUZ	14491 SW 33 STREET MIAMI, FL 33175	<input type="checkbox"/> Add
_____	_____	_____	<input checked="" type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
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_____	_____	_____	<input type="checkbox"/> Change

