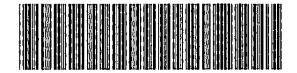
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T. MATTHEWS

JUN - 3 2022

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	AKWA CO	MPUTER & CAMERA SERV	VICES LLC		
		Name of Lim	ited Liability Company		
The enclosed	l Articles of a	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspon	ndence concerning this matter	to the following:		
		ANDREW K CHANG			
			Name of Person		
		AKWA COMPUTER & C	CAMERA SERVICES	LLC	
			Firm/Company		
		PO BOX 190321			
			Address		
		LAUDERHILL, FL 33319)		
		 	City/State and Zip Co	ode	
		akwackc@gmail.com			
		E-mail address: (to be used for future ann	nual report notific	cation)
or further in	nformation co	oncerning this matter, please co	all:		
Andrew K C	Chang		954	549-5079	
	Name of	Person	Area Code	Daytime	Felephone Number
nclosed is a	a check for th	e following amount:			
■ \$25.00 F	filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing F Certified Copy (additional copy is	·	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg Div P.C	iling Address gistration S vision of Co D. Box 632 Itahassee, I	section orporations 7	Regi Divi The 2415	t Address: istration Sect sion of Corp Centre of Ta 5 N. Monroe ahassee, FL I	orations llahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILEC SECRETARY OF STATE DIVISION OF CORPORATIONS

AKWA COMPUTER & CAMERA SERVICES LLC

22 APR 21 PM 4: 04

(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 March 15, 2022	and assigned	
Florida document number L22000130172			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the c	abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	2960 NW 55th Ave #2A		
(Principal office address MUST BE A STREET ADDRESS)	Lauderhill, Fl 33319		
			
Enter new mailing address, if applicable:	PO BOX 190321		
Mailing address MAY BE A POST OFFICE BOX)	Lauderhill, Fl 33319		
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the na</u>	ne of the new registered	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida	, Florida	
	City	Zip Code	
w Registered Agent's Signature, if changing Registered Agent:	•		
vereby accept the appointment as registered agent and agree ovisions of all statutes relative to the proper and complete cept the obligations of my position as registered agent as fing filed to merely reflect a change in the registered office appany has been notified in writing of this change.	performance of my duties, and I am provided for in Chapter 605, F.S. Or	familiar with and ; if this document is	

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>	Address	Type of Action
			□Remove
			□Change
			□Remove
]Change
			□Remove
			UChange
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove

	
Effective	e date, if other than the date of filing: (optional)
lf an effect Note: If	e date, if other than the date of filing:
	it's effective date on the Department of State's records.
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