13000611515

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	:y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer.	

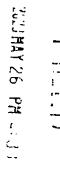
Office Use Only



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7/30/23 VU



COVER LETTER

Div	ision of Corp	porations			
CHRIPOT		FECHNOLOGIES, LLC			
SUBJECT:		Name of Limi	ited Liability Company		
The enclose	d Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return	n all correspo	ndence concerning this matter	to the following:		
		Matthew Jemtrud			
			Name of Person		
		Itasca Federal Solutions, L.	LC		
			Firm/Company		
		1435 S Harbor City Blvd, S	STE 801		
			Address		•
		Melbourne,FL 32901			
			City/State and Zip Code		•
		matthew.jemtrud@gmail.co	m to be used for future annual rep	port notification)	
				on notification)	
For further i	nformation co	oncerning this matter, please ca			
Matthew Jer	mtrud		321 438-7 at ()	7506 Daytime Telephone Number	
	Name of	Person	Area Code	Daytime Telephone Number	r
Enclosed is	a check for th	e following amount:			
□ \$25.00	Filing Fee	■ \$30,00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	ed) Certified	ite of Status &

Registration Section

TO:

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

ability Company as it now appears on ou orida Limited Liability Company)	r records.)		
by Company were filed on $\frac{2/13/2023}{2}$		and ass	signed
·			
<u>7</u> :			
limited liability company here:			
Limited Liability Company," the designati	on "LLC" or the abbre	viation "L	.L.C."
		7 : C.:	date.
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ered office address on our records	s, <u>enter the name o</u>	f the ne	w regis
Enter Florida stre	et address		
	Florida		
Cin		Zip Code	
	ly Company were filed on 2/13/2023 Company were filed on 2/13/2023 Company here: Climited Liability Company," the designation of the design	limited liability company here: Limited Liability Company," the designation "LLC" or the abbre DDRESS) ered office address on our records, enter the name ore: Enter Florida street address Florida	and ass Signature Signatu

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>	Address	Type of Action
			□Add
			□Remove
			□Change
		<u></u>	□Add
			□Remove
			□Change
			🗖 Add
			□Remove
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			□Add
		<u> </u>	Remove
			□Change

Page 2 of 3

(If an e	tive date, if other than the date of filing:
the re	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
) Th	
) Th	3 5/9/2023
) Th	
) Th	5/9/2023 Matthe Signature of a member or authorized representative of a member