

M 2300009921
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA00000023
Phone : (954)208-0845
Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CHARLOTTE ENGINEERING AND SURVEYING, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
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STATE DIVISION

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: CHARLOTTE ENGINEERING AND SURVEYING, LLC

Enter new principal office address, if applicable: 155 N WACKER DR STE 4150, CHICAGO, IL - 60606-1788

(Principal office address)
MUST BE A STREET ADDRESS

Enter new mailing address, if applicable:

(Mailing address)
MAY BE A POST OFFICE BOX

2. The Florida document number of this limited liability company is: M23000009921

3. Jurisdiction of its organization: DE

4. Date authorized to do business in Florida: 07/31/2023

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C.," or "LLC.")

6. If amending the registered agent and/or registered officer 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: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, Florida _____

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

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7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902(1)(c), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Sandeep Patil	155 N WACKER DR STE 4150	<input checked="" type="checkbox"/> Add
		CHICAGO, IL - 60606-1788	<input type="checkbox"/> Remove
AMBR	Chris Rayasam	155 N WACKER DR STE 4150	<input checked="" type="checkbox"/> Add
		CHICAGO, IL - 60606-1788	<input type="checkbox"/> Remove
AMBR	Matthew Paul Cass	155 N WACKER DR STE 4150	<input checked="" type="checkbox"/> Add
		CHICAGO, IL - 60606-1788	<input type="checkbox"/> Remove
AMBR	Scott Gwilliam	155 N WACKER DR STE 4150	<input checked="" type="checkbox"/> Add
		CHICAGO, IL - 60606-1788	<input type="checkbox"/> Remove
AMBR	Erik Germant	155 N WACKER DR STE 4150	<input checked="" type="checkbox"/> Add
		CHICAGO, IL - 60606-1788	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Signed by:

Matthew Cass

Signature of the authorized representative

Matthew Cass

Typed or printed name of signee

Filing Fee: \$25.00

Additional AMBR for CHARLOTTE ENGINEERING AND SURVEYING, LLC

Business Address for all of the below :

155 N WACKER DR, STE 4150, CHICAGO, IL 60606-178

Govindraj Mavanur Rangaswamy

Zina Schwartz

Mindy Shimanek