

L1000047863

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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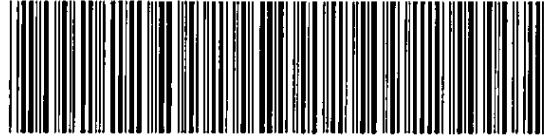
(Business Entity Name)

(Document Number)

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2019 JUN 20 A 2:58

19 JUN 20 PM 4:37

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D SCOTT

JUN 21 2019

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 815324 4311863

AUTHORIZATION : *[Signature]*

COST LIMIT : \$25.00

ORDER DATE : June 20, 2019

ORDER TIME : 1:33 PM

ORDER NO. : 815324-005

CUSTOMER NO: 4311863

DOMESTIC AMENDMENT FILING

NAME: ENDPOINT TECHNOLOGIES, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER'S INITIALS: _____

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JUN 20 11 A 2:59

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Endpoint Technologies, LLC

(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 04/22/2011 and assigned
Florida document number L11000047863.

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:

4487 Ocean View Drive

(Principal office address MUST BE A STREET ADDRESS)

Destin, Florida 32541

Enter new mailing address, if applicable:

4487 Ocean View Drive

(Mailing address MAY BE A POST OFFICE BOX)

Destin, Florida 32541

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:

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

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>
VP/Sec.	John David Gillie	Envision House, 5 North Street	☐ Add
		Horsham, West Sussex RH12 1XQ	☒ Remove
			☐ Change
AMBR	Chandru K. Advani	c/o Envision Pharma Inc., 3530	☐ Add
		Post Road, Southport, CT 06890	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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JUN 11 2008
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2024 JUN 21

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MAR 20 A 2:27 PM '68

(onal)
filing.) Pursuant to 605.0207
date will not be listed as t

(b) The 90th day after the record is filed.

Dated June 19, 2019

X  _____, 20____
Signature of a member

Signature of a member or authorized representative of a member

Joseph R. Pierce

Typed or printed name of signee