

F240000003693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

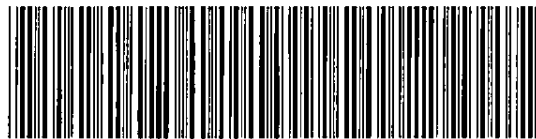
(Business Entity Name)

(Document Number)

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2024 OCT -1 PM 1:26  
SECRETARY OF STATE  
TALLAHASSEE, FL

Articles of Amendment

Florida Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Madame / Sir:

Please find enclosed the Articles of Amendment for **TANGO TECHNOLOGY CALIFORNIA INC.**, a foreign Corporation.

Payment for the required fees is enclosed (\$35.00 to the Department of State).

If you have any questions or concerns, do not hesitate to contact us. Thank you for your cooperation and assistance.

Sincerely,

The Client Services Team  
MyCompanyWorks, Inc.  
187 E. Warm Springs Rd., Ste. B  
Las Vegas, NV 89119

Phone: 702-362-2677  
Fax: 702-825-2581

**COVER LETTER**

**TO:** Amendment Section Division of Corporations

**SUBJECT:** Amendment

\_\_\_\_\_  
Name of Corporation

**DOCUMENT NUMBER:** F24000003693

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tiffany Forshey

\_\_\_\_\_  
Name of Contact Person

MyCompanyWorks, Inc.

\_\_\_\_\_  
Firm/Company

187 E. Warm Springs Rd., Ste. B

\_\_\_\_\_  
Address

Las Vegas, NV 89119

\_\_\_\_\_  
City/State and Zip Code

notice@rasi.com

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

For further information concerning this matter, please call:

Tiffany Forshey

at ( 702 ) 362-2677

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy

☐ \$52.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

2004 OCT -1 PM 1:27  
SECRETARY OF STATE  
TALLAHASSEE, FL

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR**  
**AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**  
(Pursuant to s. 607.1504, F.S.)

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

F24000003693

(Document number of corporation (if known))

1. TANGO TECHNOLOGY CALIFORNIA INC.

(Name of corporation as it appears on the records of the Department of State)

2. Delaware

(Incorporated under laws of)

3. 07/09/2024

(Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? \_\_\_\_\_

5. \_\_\_\_\_  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

\_\_\_\_\_  
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

\_\_\_\_\_  
(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Registered Agent Solutions, Inc.

2894 Remington Green Ln., Ste. A

(Florida street address)

New Registered Office Address: Tallahassee, Florida 32308

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

*Ricardo Orozco*

\_\_\_\_\_  
Signature of New Registered Agent, if changing

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SECRETARY OF STATE  
TALLAHASSEE, FL

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

*Kenneth Babcock*

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Kenneth Babcock

President

(Typed or printed name of person signing)

(Title of person signing)

FILING FEE \$35.00

2021 OCT - 1  
SECRETARY OF STATE  
FILING  
P 1:26