604000063956

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EXAMINER

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SECRETARY OF STATE

COVER LETTER

Division of Cor	rporations			
subject: Mobile	Electron, LLC			8
		ited Liability Company)	in the state of th	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	,	
Please return all correspondent	ondence concerning this matter	to the following:		
	David Schwarz			
		(Name of Person)		
	Mobile Electron, LLC		ECRETARY	
		(Firm/Company)		77
			7.5	1
19011 North Dale Mabry Hwy				
		(Address)	75 D	5
	Lutz, FL 33548	·	REAL W	
		(City/State and Zip Code)	Fr. W	
For further information of	concerning this matter, please o	all:		
David Schwarz		at (813) 649 8221		
(Name	of Person)	(Area Code & Daytime T	Telephone Number)	
Enclosed is a check for t	he following amount:			
☑ \$25,00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is e	

MAILING ADDRESS:

TO:

Registration Section

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLÉS OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mobile Electron, LLC	171-192-A			
(Name of the Limited	A Florida Limited I	ny as it now appears on our r Liability Company)	recoras.	
The Articles of Organization for this Limited L	iability Company	were filed on August 23, 20	004	_ and assigned
Florida document number L04000063956	·			
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name of	f the limited liab	oility company here:		
Syssol, LLC			Zo m	
The new name must be distinguishable and end wi "L.L.C."	th the words "Lim	ited Liability Company," the de	estignation (ISL	C" or the abbreviation
Enter new principal offices address, if applic	cable:	3326 Coconut Grove Rd	20 SS:	-
(Principal office address MUST BE A STREE	ET ADDRESS)	Land O'Lakes, FL 34639	<u> </u>	П
			<u>50 u</u>	
			310A	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	BOX)			
B. If amending the registered agent and/ registered agent and/or the new registered o			ds, <u>enter the</u>	name of the new
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			·
		(Enter Florid	la street addr	ess)
			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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma MGRM = 1	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
;	 		Add Remove
			Add Remove
		•	Add Remove
D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary)	TESS TO THE PROPERTY OF THE PR
		E. LORIDA	0 P 3103
Dated			
	R, Joseph	or or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00 -