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(Re	equestor's Name)	
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SECRETARY OF SHALL AND SHA

C. LEWIS MAR 2 8 2013 EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

Rodrigue Services LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joshua Rodrigue

Name of Person

Rodrigue Services LLC

Firm/Company

8951 Bonita Beach Rd Ste 525-293

Address

Bonita Springs, FL 34135

City/State and Zip Code

irodrique1@gmail.com

E-mail address: (to be used for future annual report notitication)

For further information concerning this matter, please call:

Joshua Rodrigue

_{....}337 \ **380-095**3

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

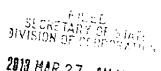
☐\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2818 MAR 27 AM II: 26

Rodrigue Services LLC		
(<u>Name of the Limited Lia</u> (A Flo	ability Company as it now appears on o orida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liabi Florida document number L0400066538		
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
TechSmart Media, LLC		
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Company," th	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	(DDRESS)	
		
Enter new mailing address, if applicable:	<u>—</u> ———	
[Mailing address MAY BE A POST OFFICE BO.	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our re address here:	cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flo	orida 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 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 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:

| SECRETARY OF SEARCE STREET OF S

MGR = M MGRM =	Managing Member		2013 MAR 27	AM 11: 26	
<u>Title</u>	<u>Name</u>	Address			Type of Action
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D. If amending any other information, enter	r change(s) here: (Attach additional sheets, if recessarys)	Y DE LATE.
	2019 MAR 27	AM 11: 26
		_
Dated March 22	2013	
	11/3	
Signardre of a Joshua Rodrigue	member or authorized representative of a member Typed or printed name of signee	<u>.</u>

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Filing Fee: \$25.00