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SECRETARY OF STATE DIVISION OF CORPORATION

G. MCLEOD

MAY - 6 2008

**EXAMINER** 

## **COVER LETTER**

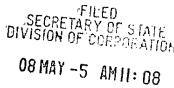
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TO: Registration S Division of Co		ě	ş
SUBJECT: WE3, L	L. C.		
	(Name of Lin	nited Liability Company)	
The enclosed Articles of	of Amendment and fee(s) are sul	bmitted for filing.	
Please return all corresp	pondence concerning this matter	to the following:	
	William E. Henderso		
		(Name of Person)	
	WE3, L. L. C.	(Firm/Company)	· · · · · · · · · · · · · · · · · · ·
		(Fittin/Company)	
	512 E 151st ST, AP	T #3D (Address)	
		(Address)	
•	New York, NY 1001	(City/State and Zip Code)	<del></del>
( - )		(City/State and Zip Code)	
For further information	concerning this matter, please of	call:	
William E. Henderson III  (Name of Person)  at (212 ) 450-7900 x 1603  (Area Code & Daytime Telephone Num		603	
(Nam	e 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)
MAI	LING ADDRESS	STREET/COURIE	A NNDFSS.

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



Name of the Limited Li (A FI	ability Company as it now appea orida Limited Liability Company)	rs on our records.)	<del></del>
The Articles of Organization for this Limited Liab	ility Company were filed on	8/18/2005	and assigned
Florida document number <u>L05000081509</u>			
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of th	ne limited liability company her	<u>re</u> :	
Techknow Logic, LLC			
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Compa	any," the designation "I	LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered offic	- C	our records, <u>enter t</u>	the name of the nev
Name of New Registered Agent:	<del></del>		
New Registered Office Address:	(F	ntar Florida street ad	drave)
	(Enter Florida street address)		
	(City)	, Florida	(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 = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	William E. Henderson III	512 W 151st ST APT #3D New York, NY 10031	Add Remove
			Add Remove
			Add Remove
			Add Remove
-			Add Remove
			Add Remove
D. If amendin	ng any other information, enter change(	s) here: (Attach additional sheets, if necessary.)	_
_			<b>-</b>
_			
Dated April 2	5th , 2008	<u>2</u> . <i>[][</i>	
_		pathorized representative of a member	
<u>v</u>	Villiam Elliott Henderson III Typed or	printed name of signee	

Page 2 of 2

Filing Fee: \$25.00