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(Req	uestor's Name)	
(Addı	ress)	-
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(riddi	<i>C33)</i>	
(City/	State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
Rusi	ness Entity Nar	na)
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(Docu	ıment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	
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C. LEVVIS

DEC 1 4 2010

EXAMINER

COVER LETTER

TO:	Registration Se Division of Cor		a a	
SUBJI	ECT: For	tech L.LC. (Name of Limi	New) Fortec L.L.C. ted Liability Company	(OH)
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		Christopher	J. Forte Name of Person	
		Fortech LLC	. (New) Fortechlo Firm/Company	2. (014)
		4915 (la Het	Rattlesnake Ita. Address	mmocK.Rd. #169
			City/State and Zip Code Classification of the Line of State and Zip Code Composed for future annual report notifications.	
For fur	ther information c	oncerning this matter, please c		
(Chris Fo	orte f Person	at (<u>239)</u> <u>292 - 8</u> Area Code & Daytime T	282 elephone Number
Enclos	ed is a check for th	ne following amount:		
\$25	5.00 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

FILED

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Fortec. L.L.C.		Markey to the second	
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on d Liability Company)	our records.) WHASSEE, FLOWIDE	
The Articles of Organization for this Limited Liability Compa	ny were filed on	- 0 6 and assigned	
Florida document number <u>LO5000112418</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here:		
(Forfet LLC) Forfech LLC. The new name must be distinguishable and end with the words "Li			
The new name must be distinguishable and end with the words "Li"L.L.C."	mited Liability Company," (he designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	,		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Chris Forte 1 ± 169 Naples	@ gmail, com 1915 Rattlesnakeltammock RI , FL 34113	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		ecords, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		, Florida Zip Code	
	•	Zip Code	
New Registered Agent's Signature, if changing Registered Agen	<u>nt:</u>		
I hereby accept the appointment as registered agent and a	gree to act in this capaci	ty. I further agree to comply with	

If Changing Registered Agent, Signature of New Registered Agent

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:

MGR =	- Manager I = Managing Member		
Title	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
D. If a	mending any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
	New L.L.C pame to be	e' Fortech L.L.C.	_
	New e-mail address is	e' Fortech L.LC. : cf naplesfl@gmail.com	_
		Ã.	2010 DEC
		70 673 673	DEC 13
Dated _	<u>Decembe</u> 9, 20	·	
	_ (hurtoplus front	, T	
	Christopher J. For	or authorized representative of a member	60
	Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00