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EXAMINER

COVER LETTER

Registration Section TO: **Division of Corporations Dynacomp Systems LLC** SUBJECT: 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: John Friedrich Name of Person Dynacomp Systems LLC Firm/Company 15710 East Waterside Circle Apt. 206 Address Sunrise Florida 33326 City/State and Zip Code jf@dynacomp.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: John Friedrich Name of Person Enclosed is a check for the following amount: \$55.00 Filing Fee & **1\$60.00** Filing Fee, \$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

V.

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**

- Dynacon	np Systems LL	C	
(Name of the Limited Liability C (A Florida Lin	Company as it now ap nited Liability Compa	pears on our record ny)	<u>ls.</u>)
The Articles of Organization for this Limited Liability Con	npany were filed on	September 19	, 2006 and assigned
Florida document numberL06000091964			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	d liability company	<u>here</u> :	
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Co	ompany," the designa	tion "LLC" or the abbreviat
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	<u></u>		
Enter new mailing address, if applicable:			ASA C
(Mailing address MAY BE A POST OFFICE BOX)			M - 1
Trusting address Well BETTI ODI OTTION BOTT			3 111
			
B. If amending the registered agent and/or register registered agent and/or the new registered office addresses.	red office address (ss here:	on our records, <u>e</u>	nter the name of the n
Name of New Registered Agent:		.,_ 1_0	
New Registered Office Address:		Enter Florida stre	et address
		Lines Florida Sire	Us velewir UUU
	City	, Flori	da
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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 ar 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 Managor Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member <u>Title</u> **Type of Action** Address <u>Name</u> **MGRM** Denise Chin 15710 East Waterside Circle √ Remove Apt. 206 Sunrise, FL 33326 ☐ Add ☐ Remove □ Add Remove ☐ Add Remove ___Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 11/29 2010 Dated_ Signature of a member or authorized representative of a member Tohn Ray Friedrich
Typed or printed name & signee

Page 2 of 2

Filing Fee: \$25.00