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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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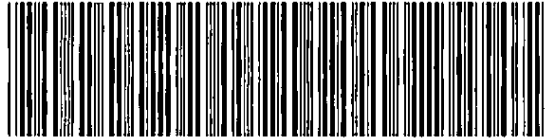
(Business Entity Name)

(Document Number)

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2024 AUG -8 AM 10:12
STATE OF FLORIDA
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Palm Tech Computer Solutions, 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:

Mary Elizabeth Neyer

Name of Person

Palm Tech Computer Solutions, LLC

Firm/Company

3736 Regent Avenue

Address

Cincinnati, OH 45212

City/State and Zip Code

bneyer@schooloutfitters.com

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

For further information concerning this matter, please call:

Mary Elizabeth Neyer

at (513)

619-5327

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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SECRETARY OF STATE
TALLAHASSEE, FL

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Palm Tech Computer Solutions, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/02/2007 and assigned Florida document number L0700000645.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3736 Regent Avenue

Cincinnati, OH 45212

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3736 Regent Avenue

Cincinnati, OH 45212

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Corporation Service Company

New Registered Office Address:

1201 Hays Street

Enter Florida street address

Tallahassee

City

Florida

32301

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 605, 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.

Christa Day

If Changing Registered Agent, Signature of New Registered Agent

Christa Day, Assistant Secretary

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Charles J Poole	6410 Carambola Circle	<input type="checkbox"/> Add
		West Palm Beach, FL 33406	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Amy Poole	6410 Carambola Circle	<input type="checkbox"/> Add
		West Palm Beach, FL 33406	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Thomas A. Brennan, Jr.	3736 Regent Avenue	<input checked="" type="checkbox"/> Add
		Cincinnati, OH 45212	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Mary Elizabeth Neyer	3736 Regent Avenue	<input checked="" type="checkbox"/> Add
		Cincinnati, OH 45212	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Brad Cates	3736 Regent Avenue	<input checked="" type="checkbox"/> Add
		Cincinnati, OH 45212	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FL

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated Juln 29. 2024

~~Signature of a member or authorized representative of a member~~

Mary Elizabeth Neyer

Typed or printed name of signer

Filing Fee: \$25.00

2024 AUG -8 AM 10:12
SEN. JEFFREY B. BLUM
TALLAHASSEE, FL