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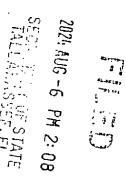
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## **COVER LETTER**

TO: Registration Se Division of Cor				
SUBJECT:	DUA Tech Sol.	utions. LLC		
		ited Liability Company		
The enclosed Articles of	`Amendment and fce(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	<u>lisa</u>	, Rung		
		Name of Person		
	Nov	A Tech Solution Firm/Company	s, ILC	
	\\3	Mulry Dr. Address	<u> </u>	
	Nice	UNE FL 325 City/State and Zip Code	78	
	15a. (UMa a	NWa - + CCh - 50 to be used for future annual report n	Lutions, Com otification)	
For further information of	concerning this matter, please ca	all:		
LISA Name of	Rung	at (850) 79	7-6496 ime Telephone Number	
		And code buy	me Telephone Number	
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address Registration of Control of C	Section Corporations 27	Street Address: Registration S Division of C The Centre of 2415 N. Mon Tallahassee, F	orporations Tallahassee roe Street, Suite 810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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NOVA TECH DOLU	1 (015, LU	
(Name of the Limited Liability Compa (A Florida Limited I	Liability Company)	<u> </u>
The Articles of Organization for this Limited Liability Company Florida document number <u>LOSOCOS [379</u> .	were filed on <u>26</u>	AUG 2008 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the design:	ation "LLC" or the abbreviation "L.L.C."
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)	· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our recor	ds, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida st	reet 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 emply with the provisions of all statutes relative to the proper and complete performance of my duties, and I amfamiliar 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.

If Changing Registered Agent, Signature of New Registered Agent

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>	Address	Type of Action
MGR	Benjamin Kalser	113 Muly Dr.	XAdd
		113 Muly Dr. Niceville, FL 32578	□ Remove
			Change
MGR	John Brennan	113 Muly Dr. Niceville, FL 32578	XIAdd
		Niceville, Fl 37578	□Remove
			□Change
			🗆 Add
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ective date, if other the effective date is listed, the	nan the date of filing date must be specific and	cannot be prior to date	e of filing or more than 90	_ ( <b>optional) ↔</b> days after fili <b>ng</b> ! Purs	:Usan to 605.02 <u>07</u>
n effective date is listed, the te: If the date inserted in cument's effective date of	n this block does not m	neet the applicable s	tatutory filing requirem	ents, this date will i	nethe listedia
and a circuit date of	m the topartment of St	are a records.		A.S.	5
cord specifies a delayed	effective date, but not	an effective time, a	t 12:01 a.m. on the earli	్లా ier of: (b) Th <b>e</b> 90ti	h dev after the
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ied 29 JULY					
led <u>&amp;7 OULY</u>	Min Q				
led <u>29 JULY</u>	Signature of a n	nember or authorized	representative of a member	er	<del></del>