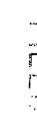
## L090000122583

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
A. LUNT					
JUN <b>14</b> 2011					
EXAMINES					

Office Use Only

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## **COVER LETTER**

TO:	Registration S Division of Co				
SUBJECT: Aktarius Technical Services LLC				•	
30.00		Name of Limi	ted Liability Company		
The en	closed Articles of	f Amendment and fee(s) are sub	omitted for filing.		
Please	return all corresp	ondence concerning this matter	to the following:		
	Stephen C. Prier Name of Person		············		
	Aktarius Technical Services LLC		LC E		
	Firm/Company		TC MALL AHA	·	
	7506 Yellow Bluff Rd			ļ	
	Address			English PM	[ ]
	Panama City FL 32404				£
	City/State and Zip Code				
		ste	ve.prier@aktarius.com		
		E-mail address: (	to be used for future annual repor	t notification)	
For fur	ther information	concerning this matter, please of	all:		
	S	tephen Prier	at ( 850 )	814-3562	
	Name	of Person		Paytime Telephone Number	
Enclos	ed is a check for	the following amount:			
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is end	\$60.00 Filing Fee, Certificate of Status & Closed) Closed Closed Certified Copy (additional copy is enclosed)	osed)
	MAILING ADDRESS: Registration Section Division of Corporations		STREET/CO Registration S Division of C		
P.O. Box 6327 Tallahassee, FL 32314		Clifton Build			

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Aktar	ius Technical Services LL	C on our records	<del>., </del>			
(A	Liability Company as it now appears Florida Limited Liability Company)	on our records.				
The Articles of Organization for this Limited Li Florida document numberL09000122		cember 29, 2009	and assigned			
This amendment is submitted to amend the following	owing:					
A. If amending name, enter the new name of	the limited liability company here:					
	Aktarius LLC					
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Company	y," the designation "L	LC" or the abbreviation			
Enter new principal offices address, if applications	able:					
(Principal office address MUST BE A STREE	T ADDRESS)					
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)	BOX)					
B. If amending the registered agent and/or the new registered of	fice address here:	r records, <u>enter t</u>	he name of the new			
Name of New Registered Agent:	Stephen C. Prier					
New Registered Office Address:	7506 Yellow Bluff Rd.					
	Enter Florida street address					
	Panama City	, Florida	32404			
	City		Zip Code			
Nam Danistand Annual Cinnature if shanning I	1					

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, Whereby 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 **Title** Name **Address Type of Action** MGR Glenn R. Eckhardt 7506 Yellow Bluff Rd ☐ Add ✓ Remove Panama City FL 32404 ☐ Add ☐ Remove ☐ Add Remove Remove ∏Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) June 6 Dated \_\_\_\_\_ Signature of a member or authorized representative of a member

Page 2 of 2

Stephen Craig Prier
Typed or printed name of signee

Filing Fee: \$25.00