Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : NATIONAL CORPORATE RESEARCH, LTD.

Account Number : I20000000088 Phone : (800)221-0102 Fax Number : (800)944-6607

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Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HUNTER TECHNICAL SERVICES, LLC

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Electronic Filing Menu

Corporate Filing Menu

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K. SALY EXAMINES

APR 1 6 2014

4/15/2014

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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ARTICLES OF AME	NDMENT
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ARTICLES OF ORGA OF	ENDMENT  ANIZATION  ERVICES, LLC  How appears on our records.)  Company)  iled onJanuary 19, 2010 and assigned
HUNTER TECHNICAL SE	ERVICES, LLC
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.)
The Articles of Organization for this Limited Liability Company were fill Florida document numberL10000006397	iled on January 19, 2010 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	
an amendment manic, exist the new harms of the manice mainting to	mpany nere:
The new name must be distinguishable and end with the words "Limited Liability Cor	money "the designation "I [ C" or the abbreviation " ] C"
	which are seen Branch at the appropriate Differ
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	
Musting induces may his a foul correct boat	
3. If amending the registered agent and/or registered office as registered agent and/or the new registered office address here:	ldress on our records, enter the name of the new
·	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	"Florida

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.

If Changing Rogistered Agent, Signature of New Registered Agent

Page 1 of 3

IGR = M MBR = A	annger uthorized Member		
<u> Title</u>	Name	Address	Type of Action
MGR	Arnold J. Hodes	PO Box 140668	
		Coral Gables FL 33114-	0668 Remove
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Address of Gregory Tresness is as follows:	ows:
185 Ainsley Drive	
Syracuse, NY 13210	
Effective date, if other than the date of filling:	(optional)
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