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(December 4) No. 1					
(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

Division of Corporations					
SUBJECT:	Innovated Preve	entive Maintenance	LLC		
		ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	pondence concerning this matte	r to the following:			
	G. Brian Maclean				
	Name of Person				
	Gold	Gold Chrome Technology LLC			
		Firm/Company			
		7074 Barrancas Ave			
		Address			
		Bokeelia FI 33922			
		City/State and Zip Code			
	goldchr E-mail address: (goldchrometechnology@gmail.com E-mail address: (to be used for future annual report notification)			
For further information	concerning this matter, please	call:			
	Prion Macleon	220	340 0300		
G Brian Maclean Name of Person		at (239_) Area Code & I	340-0399 Daytime Telephone Nu	mber	
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 end	Cert closed) Cert	0 Filing Fee, ificate of Status & ified Copy litional copy is enclosed)	
MAILING ADDRESS.		STDEFT/CO	NUDUED ANNOES	· ·	

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Innovated Preventive (Name of the Limited Liability Compan (A Florida Limited Limite	Maintenance LLC <u>Iv as it now appears on our records.</u>) iability Company)
The Articles of Organization for this Limited Liability Company Florida document numberL10000017973	were filed onAug 30, 2010 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	<u>lity company here</u> :
Gold Chrome Tec	chnology LLC
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	7074 Barrancas Ave
(Principal office address MUST BE A STREET ADDRESS)	Bokeelia Fl 33922
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7074 Barrancas Ave Bokeelia FI 33922
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent:	
A STATE OF THE STA	

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, 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 Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member <u>Title</u> <u>Name</u> **Address Type of Action** MGR G Brian Maclean 7074 Barrancas Ave **✓** Add Bokeelia Fl 33922 Remove ☐ Add Remove ☐ Add ☐ Remove Add Remove ∏Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) April 22, 2011 Dated _____ Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00