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# **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT: <u>SCR</u>	HILL Applic Namo of Lim	CHONS IN FORENSIC	C Engineering, LLC.
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
		Name of Person	Cock Francisc/10
	Juliper of	Firm/Company	rensk Engineering LLC
	12555 Drai	nge Dr. #40	227
	Davie FZ	City/State and Zip Code	
	E-mail address: ()	10 befused for future annual report noti	GINS/COM  (fication)
For further information c	oncerning this matter, please ca	all:	
Wendy We Name o	1553CD-PC	at (954) 254. Area Code Daytim	14 (8) ne Telephone Number
Enclosed is a check for th	ne 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)
<b></b>		g	

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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SCIENTIFIC APPLICATIONS IN FORENSIC ENGINEERING, 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 JUNE 7, 2023 and assigned Florida document number  $\frac{L10000066240}{}$ 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 "LLC." 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 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: New Registered Office Address: Enter Florida street address

## 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 Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	WENDY WEISSGERBER	12555 Orange Drive, \$4027	
		Davie, FL 33330	■ Remove
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Typed or printed name of signee