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G. MCLEOD

SEP 3 2010

EXAMINER



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09/02/10--01007--010 **25.00

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COVER LETTER

| то: | Registration Section Division of Corporations |
|---------|---|
| SUBJE | Name of Limited Liability Company |
| The en | closed Articles of Amendment and fee(s) are submitted for filing. |
| Please | return all correspondence concerning this matter to the following: |
| | Robert P. Giesen |
| | Giesen Kenny P.A. |
| | 1200 N. Federal Highway, Svite 200 Address |
| | Boca Raton Florida 33432 City/State and ZipCode |
| | E-mail address: (to be used for future annual report notification) |
| For fur | ther information concerning this matter, please call: |
| | Robert P. Giesen at (561) 210 - 8476 Name of Person Area Code & Daytime Telephone Number |
| Enclos | sed is a check for the following amount: |
| \$25 | 5.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$\ \text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \text{\$\ \text{Certified Copy (additional copy is enclosed)}} \$\ \text{Certified Copy (additional copy |

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limited Liability (A Florida | Tech Solutions Company as it now appears on o Limited Liability Company) | LLC ur records.) | |
|--|--|--|--|
| The Articles of Organization for this Limited Liability C | Company were filed on Ay | 18, 26/2 ^a nd assigned | |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the lim | ited liability company here: | | |
| The new name must be distinguishable and end with the wo "L.L.C." | rds "Limited Liability Company," tl | ne designation "LLC" or the abbreviation | |
| Enter new principal offices address, if applicable: | | - swel | |
| (Principal office address MUST BE A STREET ADD) | RESS) | 10 | |
| | | A PORT | |
| | | | |
| Enter new mailing address, if applicable: | | Co A CT | |
| • | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | ω ω | |
| | | 3× | |
| B. If amending the registered agent and/or registered agent and/or the new registered office add | | ecords, <u>enter the name of the new</u> | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | Enter Fl | Enter Florida street 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 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 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 Type of Action Name Address Kenan Imamovic MGRM ☐ Add Remove _ Add Remove ☐ Add Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Robert P. Giesen
Typed or printed name of signee

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Filing Fee: \$25.00