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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT

Selas Technologies, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christina Cheli

Name of Person

Carpenter & Berger PL

Firm/Company

6400 N Andrews Ave Suite 370

Address

Fort Lauderdale, FL 33309

City/State and Zip Code

ccheli@carpenterberger.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christina Cheli

_{at (}954₎772-0121

Name of Person

Area Code & Daytime Telephone Number

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 enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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**

FILED 2013 NOV 19 PM 3: 12 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Selas Technologies, 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 1	Liability Company were filed on 0	2/07/2011 and assigned			
Florida document number L11000015982	·				
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited liability company he	ere:			
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Comp	pany," the designation "LLC" or the abbreviation			
Enter new principal offices address, if appli	cable:				
(Principal office address MUST BE A STREE	ET ADDRESS)				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>				
B. If amending the registered agent and registered agent and/or the new registered o		our records, enter the name of the new			
Name of New Registered Agent:	Christina Cheli, Esq.				
New Registered Office Address:	6400 N Andrews Ave Su	ite 370			
	Enter Florida street address				
	Fort Lauderdale	, Florida <u>33309</u>			
	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 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
MGRM	Kyman, Steven L	1000 West McNab Road	Add
		Suite 256	Remove
		Pompano Beach FL 33069	3
MGR	Duhaney, Janell	1061 NW 80 Ave #1	_
		Margate, FL 33063	Remove
MGRM	Gunn, Kary A	7525 NW 50 Court	Add
		Coral Springs FL 33067	Remove
MGR	XGLB Holdings LLC	1000 West McNab Road	Add
		Suite 256	Remove
		Pompano Beach FL 33069	
MGR	MCG Enterprise, Inc.	97 Froelich Farm Blvd	Add
		Woodbury, NY 11797	Remove
			Add
			_ _
			Remove

). J	f amendii	ng any oth	er information, e	enter change(s) h	ere: (Attach ad	lditional sheets, if	necessary.)
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Date	ed	15	,	.13			
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Filing Fee: \$25.00

FILED

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