

L11 00001598Z

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

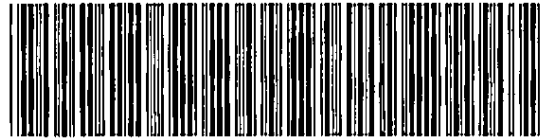
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17 Aug 20

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:

Jason Piccininni

Name of Person

Selas Technologies, LLC

Firm/Company

7957 N. University Dr. #232

Address

Parkland, FL 33067

City/State and Zip Code

jp Piccininni@selastech.com

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

For further information concerning this matter, please call:

Jason Piccininni

954 673-2730
at ()

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

11:24

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

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 Liability Company were filed on February 7, 2011 and assigned Florida document number 11000015982.

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 "L.L.C."

Enter new principal offices address, if applicable:

1625 N. Highway A1A Unit 202

(Principal office address MUST BE A STREET ADDRESS)

Indialantic, FL 32903

Enter new mailing address, if applicable:

7957 N. University Dr. #232

(Mailing address MAY BE A POST OFFICE BOX)

Parkland, FL 33067

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

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 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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Kyman, Steven L.	1000 West McNab Road	<input type="checkbox"/> Add
		Suite 256	<input checked="" type="checkbox"/> Remove
		Pompano Beach FL 33069	<input type="checkbox"/> Change
MGR	Duhaney, Janell	1061 NW 80 Ave #1	<input type="checkbox"/> Add
		Margate, FL 33063	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	XGLB Holdings LLC	1000 West McNab Road	<input type="checkbox"/> Add
		Suite 256	<input checked="" type="checkbox"/> Remove
		Pompano Beach FL 33069	<input type="checkbox"/> Change
MGRM	Gunn, Kary A.	1625 N. Highway A1A Unit	<input type="checkbox"/> Add
		Unit 202	<input type="checkbox"/> Remove
		Indialantic, FL 32903	<input checked="" type="checkbox"/> Change
AMBR	Wells, Ronald P.	811 NE 33rd Street	<input checked="" type="checkbox"/> Add
		Boca Raton, FL 33431	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

⑤

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated August 9th 2021

Signature of a member or authorized representative of a member

Kary A. Gunn

Typed or printed name of signee

Filing Fee: \$25.00