Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : PAUL SALVER, P.A.

Account Number : 120020000087 Phone : (954)389-1333

Fax Number : {954}389-1397

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TECH MIAMI LLC

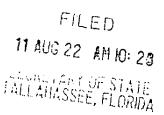
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K. SALY **EXAMINER** AUG 23 2011

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Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



TECH	I MIAMI LLC		
(Name of the Limited Liability C (A Florida Lim	ompany as it now appeat nited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Con Florida document number L11000050579	npany were filed on	4/28/11	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limiter	d liability company her	œ:	
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Compa	my," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		our records, <u>enter</u>	the name of the new
Name of New Registered Agent:		······································	
New Registered Office Address:			<del>,</del>
	En	ter Florida street add	dress
		, Florida	
	Citv		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>	Name	Address	Type of Action
MGR	MATEUS, MARIA T.	20102 NW 27 CIRCLE MIAMI, FL 33056	Add Remove
<del>·</del>			Add Remove
			Add Romove
			Add Remove
			Add Remove
			Add Remove
D. If amer	nding any other information, enter c	hange(s) here: (Attach additional sheets, if necessary.)	_
			<del></del>
			<del>-</del>
Dated	8/20 1 7	8011	
<b></b>	Signature of a me	ember or authorized representative of a member	<del></del>
		HENRY SALAZAR  'yped or printed name of signed	<u> </u>
	1/	ypeo or printed name or signed	

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Filing Fee: \$25.00