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G. MCLEOD

OCT 19 2011

EXAMINER



700213166697

10/13/11--01009--008 \*\*35.00

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SECRETARY OF STATE ALLAHASSEF. FLORIDA

## **COVER LETTER**

TO:	Registration S Division of Co							
SUBJECT: Change Of Officers								
Name of Limited Liability Company								
The end	closed Articles o	f Amendment and fce(s) are sul	bmitted for filing.					
Please	return all corresp	condence concerning this matte	r to the following:					
	Mark Anderson							
			Name of Person					
			Eons Tech, LLC					
· ·			Firm/Company	-				
			7021 Leighton Way					
		<del>- · · · · · · · · · · · · · · · · · · ·</del>	Address					
			Orlando, FL 32822	·				
			City/State and Zip Code					
		manderso	n@maxresultsmarketing	.com				
For furt	her information	E-mail address: ( concerning this matter, please of	to be used for future annual report no	outication)				
	N.A.	ark Anderson	407	2524700				
		of Person	at ( 407 ) Area Code & Day	time Telephone Number				
Enclose	d is a check for	the following amount:						
<b>\$25</b> .	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
	Regisi Divisi P.O. B	ING ADDRESS: ration Section on of Corporations lox 6327 assee, FL 32314	STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	porations Center Circle				

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Eor Eor	ns Tech, LLC				
( <u>Name of the Limited Liability</u> (A Florida L	Company as it now appears	on our records.)			
(A Fiorita C	mined Elabinity Company)				
The Articles of Organization for this Limited Liability Co	ompany were filed on	5/10/11	and assig	ned	
Florida document numberL11000054938					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limi	ted liability company here	:			
The new name must be distinguishable and end with the worn "L.L.C."	ds "Limited Liability Compan	y," the designation "	'LLC" or the ab	breviat	ion
Enter new principal offices address, if applicable:			TALE SE	==	
(Principal office address MUST BE A STREET ADDR	ESS)		<b>≥</b> 20	20	_ ****
			ASS		- (ense
			Ç. Ç.		1
Enter new mailing address, if applicable:			<u> </u>	<u> </u>	- j 4
(Mailing address MAY BE A POST OFFICE BOX)				မှ	_ (_
			<b>5</b> m	<u> </u>	-
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr		ir records, <u>enter</u>	the name of	the n	<u>ew</u>
Name of New Registered Agent:					-
New Registered Office Address:		·- <u>-</u> .			_
	Enter Florida street address				
	City	, Florida	Zip Code		-
	City		Zip Coae		

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 = Ma MGRM = M	nager Ianaging Member		
<u>Title</u>	Name	Address	Type of Action
MGRM	Karl Renaut	7360 Curry Ford Rd Suite 721914 Orlando, EL 32822	Add Remove
			Add Remove
			Add Remove _
			Add Remove
			∏Add Remove
			Add Remove
D. If amend	ling any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	_
			<del></del>
			_
Dated	Signature of a mambar	or authorized representative of a member	<del></del>
	(	lark J Anderson or printed name of signee	<del></del>

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