L110000 70650

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SECRETARY OF STATE
VALLAHASSEE, FINATE

J. SAULSBERRY EXAMINER

AUG 1.8 2011

COVER LETTER

Division of Corp	orations				
SUBJECT: Relia	ble Systems	s Solutions LL ited Liability Company	<u></u>		
			,		
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.			
Please return all correspond	dence concerning this matter	to the following:			
	Richard Co	ronado			
		Name of Person			
	Reliable Sy	Name of Person Stems Solutions Firm/Company			
	642 Fern	Lane Ur		XIII SEC	
	Orlando 1	Lake Dr Address FL 32825		2011 AUG 17 AM 8: 01 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
		City/State and Zip Code eliable 5 ys tem solution. to be used for future annual report notifica	COM	Y OF ST	
For further information cor	ncerning this matter, please c		uon)	S: O.	
Richard Coro	nado	at (407) 282 115 Area Code & Daytime T	Ų	r	
Name of I	Person	Area Code & Daytime T	'elephone Number		
Enclosed is a check for the	following amount:				
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Certificate of Certified Co (additional of	of Status &	

MAILING ADDRESS:

Registration Section

TO:

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

Reliable System	s Solutions, LLC		
(Name of the Limited Liabilit (A Florida	y Company as it now appears on our records.) Limited Liability Company)		
The Articles of Organization for this Limited Liability of Florida document number <u>L110000</u> 70650	Company were filed on		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability company here:		
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)		
Enter new mailing address, if applicable:	SECRETALIANA		
(Mailing address MAY BE A POST OFFICE BOX)	SSE 7		
	stered office address on our records, enter the name of the new		
B. If amending the registered agent and/or registered agent and/or the new registered office add			
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 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

or Managing Member being added or removed from our records:				
	= Manager M = Managing Member			
<u>Title</u>	Name	Address	Type of Action	
46RM	Alma J Coronado	645 Fern Lake Dr Orlando FL 32825	Add Remove	
			Add Remove	
			Add Remove	
D. If a	mending any other information, enter Reliable Systems Solu Richard Coronado	r change(s) here: (Attach additional sheets, if necessary will have Two a and Alma T Coronado.	ssary.) Dwners/MGRM's	
Dated _	Manual C Signature of a	2011 Somuls member or authorized representative of a member	ZOII AUG 17 AM 8:01 SECRETARY OF STATE TALL AHASSEE, FLORIDA	
		Typed or printed name of signee		

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Page 2 of 2

Filing Fee: \$25.00