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		COVER LETTER	
TO: Registration S Division of Co			
SUBJECT:	Nea	Techne, LLC	
5003EC1.		ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
	, Ct	wan A. Culbraath Eag	
		even A. Culbreath, Esq. Name of Person	
	Law Of	fices of Steven A. Culbreat	h
		Firm/Company	
	111 2nd Av	ve NE,Ste900 St. Pete FL 3 Address	3701
	C+	Potoroburg El 22701	
	51	. Petersburg, FL 33701 City/State and Zip Code	
	E-mail address: (ve@saculbreathlaw.com to be used for future annual report notif	fication)
For further information	concerning this matter, please		
Steven	A. Culbreath, Esq.	at (727)	456-6463
	of Person		ne Telephone Number
Enclosed is a check for	-		
∑ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	 \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regist Divisi P.O. E	LING ADDRESS: Iration Section on of Corporations Box 6327 Iassee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	on rations enter Circle

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	MENDMEN'	Т	
TC ARTICLES OF OI OF	RGANIZATI(
		2011 SEP 22 AM 10: 48	
Nea Techr (Name of the Limited Liability Compan)	ie, LLC y as it now appears	s on our records.) SECRETARY OF STATE TALLAHASSEE. FLORID	
(A Florida Limited Li	ability Company)	TALLAHASSEE. FLORID	
The Articles of Organization for this Limited Liability Company v	were filed on	09/07/2011 and assigned	
florida document number L11000102594			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	<u>lity company here</u>	;	
he new name must be distinguishable and end with the words "Limite L.L.C."	d Liability Compar	y," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)			
			
Inter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
3. If amending the registered agent and/or registered offi egistered agent and/or the new registered office address here:		ar records, <u>enter the name of the new</u>	
Name of New Registered Agent:			
New Registered Office Address:		T ¹	
	Enter Florida street address		
	Citta	, Florida Zip Code	
	City	zip Code	
au Degistared Agentic Signature if sharefue Destates of t			
ew Registered Agent's Signature, if changing Registered Agent:			

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 an inding the Managers or Managing Members on our records, enter the title, name, and address of each Manager for 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	Nicholas Casadio	2724 Bedford Way Sarasota, FL 34239	Add Remove
MGRM	Nicolas Casadio	2724 Bedford Way Sarasota. FL 34239	Add Remove
			_ Add _ Remove
			Add Remove
			Add Remove
·			Add Remove
D. If amendin	ng any other information, enter change(s	s) here: (Attach additional sheets, if necessary.)	-
		TALLAHA	2011 SEP
 Dated	September 19th , 2011	SSEE. FLORIDA	22 MID 42
: 	Signature of a member or	authorized representative of a member	 C21 ··

Steven A. Culbreath, Esq. Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00