## 1/2000063927

(Re	equestor's Name)			
(Ad	ddress)			
(Ac	ddress)			
(CI	ity/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Br	usiness Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
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## **COVER LETTER**

Division of Corporations				
SUBJECT: SEO OUTSOURCING INDIALLO 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:				
ONEIL RAMBEEN Name of Person				
Firm/Company				
Firm/Company  10282 Sw 9th Lone  Address  Pembroke Pines FL 33025  City/State and Zip Code  Orandeen Ohotmad. Com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Pneil Rondeen at (786) 4705588  Name of Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$55.00 Filing Fee \& \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ \$\$ \$60.00 Filing Fee, \text{Certificate of Status } \& \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$				

**Registration Section** 

TO:

MAILING ADDRESS:
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

ed 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 5/11/2012 and assigned Florida document number L12000063927 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: SOLUTIONS LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: ŒĐ. (Mailing address MAY BE A POST OFFICE BOX) 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

## 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.

City

Florida

Zip Code

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 = Mans MGRM = Ma	ager anaging Member		
<u>Title</u>	Name	Address	Type of Action
<u>mgr</u> m	RAJIV DAVE	132FT RING R VETALPUK, GU ZNDIA, XX. 3	Add Add Remove
			Add Remove
			Add Remove
			A Add Remove;
			□ □ Add □ □ □ Remove
			Add
D. If amendi	ng any other information, enter chang	ge(s) here: (Attach additional sheets, if n	
			· · · · · · · · · · · · · · · · · · ·
Dated	Tay 16, 20	12.	
	ONEIL RAMI	r or authorized representative of a member	170, 70

Page 2 of 2

Filing Fee: \$25.00