

L1200019215

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TALLAHASSEE, FLORIDA

2016 MAR 14 AM 7:56

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

MAR 16 2016  
C. BRIDG

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: AOT TECHNOLOGIES, LLC**

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:

**MICHELOVE JULES**

Name of Person

**BOYER LAW FIRM, P.L.**

Firm/Company

**9471 Baymeadows Road, Suite 406**

Address

**Jacksonville, Florida 32256**

City/State and Zip Code

**Office@boyerlawfirm.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Michelove Jules**

Name of Person

**904**

Area Code

**236-5317**

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

AOT TECHNOLOGIES, L.L.C.

(Name of the Limited 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 09/18/2012 and assigned  
Florida document number L12000119218.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1001 Brickell Bay Drive #1712

**(Principal office address MUST BE A STREET ADDRESS)**

Miami, FL 33132

Enter new mailing address, if applicable:

1001 Brickell Bay Drive #1712

**(Mailing address MAY BE A POST OFFICE BOX)**

Miami, FL 33132

**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

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 605, 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**

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	George Philip	625 Alpha St, Victoria, BC	<input checked="" type="checkbox"/> Add
		Canada V8Z 1B4	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Praveen Ramachandran	625 Alpha St, Victoria, BC	<input checked="" type="checkbox"/> Add
		Canada V8Z 1B4	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Abraham George	11329 Aston Hall Drive	<input type="checkbox"/> Add
		Jacksonville, FL 32246	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

SECRETARY OF STATE  
HILL ASSESSMENT

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2016 MAR 14 9:57  
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TALLAHASSEE, FLORIDA

Dated March 6, 2016

GEORGE PHILIP

**Filing Fee: \$25.00**