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FLORIDA DEPARTMENT OF STATE Division of Corporations

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February 9, 2015

TEKNOPARK US, LLC. 1551 NW 82ND AVE DORAL, FL 33126

SUBJECT: TEKNOPARK US, LLC.

REF: L12000122128

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filling cover sheet.

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Deborah Bruce Regulatory Specialist II

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FAX Aud. #: E15000032051 Letter Number: 415A00002642

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TEKNO	PARK US, LLC	
(Name of the Limited Lia (A Pic	pility Company as it now appears on our rec- ida Limited Liability Company)	erds.)
The Articles of Organization for this Limited Liabilit Florida document number L12000122128		
This emendment is submitted to amend the following		
A. If amending name, enter the new name of the	mited liability company here:	
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 AD	ORESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	<del></del>	
B. If amending the registered agent and/or re registered agent and/or the new registered office a		rds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street adt	iress
	· · · · · · · · · · · · · · · · · · ·	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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member Address Type of Action Title <u>Name</u> MGR KAREN RAMOS 8725 NW 18TH TERRACE 201 □ Add **DORAL FL 33172** ■ Remove \_\_\_\_ Add \_\_\_\_\_ Remove \_\_□ Add ☐ Remove \_\_ 🗆 Add \_\_\_\_\_ Remove \_□ Add \_\_\_\_\_ Remove \_ 🗆 Add \_\_\_\_\_ Remove

ffective date, if other he effective date must be spe the date this document is file	than the date of filing: ecific, cannot be prior to date of receipt or filed date and cannot be by the Florida Department of State)	(optional) not be more than 90 days after
Dated 01/13	2015	

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