Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H250000513013)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GARCIA GARCIA ASSOCIATES INC

Account Number : 120110000056 : (305)823-9292 Phone Fax Number : (305)824-9703

ffEnter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN INTELLECTUAL ENGINEERING, LLC

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\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INTELLECTUAL ENGINEERING,		
(Name of the Limited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company were filed on	11/15/2012	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company h	ere:	
INTELLECTUAL ENGINEERING, L	LC OF FLA	
The new name must be distinguishable and contain the words "Limited Liability Company," the	designation "LLC" or th	ic abbreviation "L L.C."
Enter new principal offices address, if applicable:		<u></u>
(Principal office address MUST BE A STREET ADDRESS)		
		2
		25 25 7
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		0 m
		C. C.
B. If amending the registered agent and/or registered office address on our agent and/or the new registered office address here:	records, enter the (name of the new register
Name of New Registered Agent:		
New Registered Office Address: Enter Fl	orida street address	
	. Florid	a
Cin:	, rioria	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 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>	Name	Address	Type of Action
			□ Add
			□Remove
			□Cliange
			□Remove
			⊡Change
			DAdd
			🗆 Remove
			□Add
			⊡Remove
			TChange
			□Add
			DRemove
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]Remove
			Change

amending	any other Information, enter change(s) here: (Attach additional sheets, if necessary.)
*** *********************************	
lf an effective o Note: If the	te, if other than the date of filing: (optional) inte is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.024 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at effective date on the Department of State's records.
e record spec rd is filed.	ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th
Dated	4TH OF FEBRUARY 2025
_	Signature of a member or authorized representative of a member
	ROBERTO CRESPO

Filing Fcc: \$25.00