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To:

Division of Corporations

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From:

Account Name : SIMPLY ROYALTY ACCOUNTING & TAX SERVICES

Account Number : I20240000096

Phone : (305)742-2298

Fax Number : (305)742-2299

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DPTOFSTATE@18506176383 Page: 3 of 5 COVER LETTER (\$\mathrm{\pm\$} \ 25 \impsigm 3396443)

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SUBJEC	TECNOTI	ROPOLIS, LLC			
		Name of Lin	mited Liability Company	<u>_</u>	
The enclo	nsed Articles of	Amendment and fee(s) are an	humined for Elica		
		RABB ATH, HABI B			
			Name of Person	-	
		TECNOTROPOLIS, LLC	C		
			Firm/Company		
		3043 NW 107 AVE			
			Address		
		DORAL, FL 33172			
Division of Corporations TECNOTROPOLIS, LLC SUBJECT: Name of Limit Name of Limit The enclosed Articles of Amendment and fee(s) are subm Please return all correspondence concerning this matter to RABBATH, HABIB TECNOTROPOLIS, LLC 3043 NW 107 AVE DORAL, FL 33172 admin@tecnotropolisla.com		City/State and Zip Code			
			(to be used for future annual re-	port notification)	
For furthe	r information c			·	
RABBA1	Н, НАВІВ		786 4208	844	
	Name o	f Person		Daytime Teleph	one Number
Enclosed i	s a check for th	nc following amount:			
过 \$25.0 0	O Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclose		\$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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

/lin= 0200000)

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ARTICLES OF AMENDMENT FILEL ARTICLES OF ORGANIZATION

2025 SEP 22 PH 3:01

TECNOTROPOLIS, LLC

OF

	(A Florida Limited Liability Company)		
The Articles of Organization for this Limited Florida document number L13000011231	Liability Company were filed on 01	1/22/2013	and assigned
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability company he	re:	
he new name must be distinguishable and contain the	words "Limited Liability Company," the de-	esignation "LLC" or the	abbreviation "L.L.C."
enter new principal offices address, if appl	lcable:		
Principal office address MUST BE A STRE			<u> </u>
Enter new mailing address, if applicable:			
Enter new mailing address, if applicable:	E BOX)		
Enter new mailing address, if applicable:	E BOX)		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or	registered office address on our re	ecords, <u>e</u> nter the na	me of the new regist
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or	registered office address on our re	ecords, enter the na	me of the new regist
inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE If amending the registered agent and/or gent and/or the new registered office addr	registered office address on our re	cords, enter the na	me of the new regist
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Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE If amending the registered agent and/or gent and/or the new registered office address.	registered office address on our reess here: SAKKAL, CHARLES 3043 NW 107 AVE	ecords, enter the na	me of the new regist
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or gent and/or the new registered office address and the new registered of the new registered o	registered office address on our reess here: SAKKAL, CHARLES 3043 NW 107 AVE		me of the new regist

d Agent's Signature, if changing Revistered 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:

(H2500033 96 443)

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			EAdd 7
			Remove
			□ Change
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