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(Requestor's Name)

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CLINE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pryde 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:

Brian Cole

Name of Person

Pryde Technologies, LLC

Firm/Company

3956 Town Center Blvd, Suite 480

Address

Orlando, FL 32837

City/State and Zip Code

brian@prydetechologies.com

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

For further information concerning this matter, please call:

Brian Cole

Name of Person

at (321) 517-9250

Area Code & 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

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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 = Manager

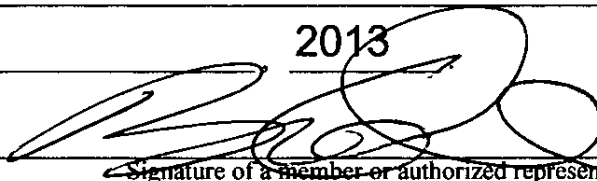
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Cameron Pearce	3801 S. Congress Ave	<input type="checkbox"/> Add
		#315	<input checked="" type="checkbox"/> Remove
		Austin, TX 78704	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated **June 26**

2013



Signature of a member or authorized representative of a member

Brian Cole

Typed or printed name of signee

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Filing Fee: \$25.00

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