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COVER LETTER

TO: **Registration Section Division of Corporations** 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@prydetechnologies.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 Enclosed is a check for the following amount:

□\$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

■\$30.00 Filing Fee &

Certificate of Status

□ \$25.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

□\$60.00 Filing Fee,

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Certificate of Status &

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pryde Technologies, LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our rec Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability C	Company were filed on 3/26/2013	and assigned
Florida document number L13000044542	<u> </u>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and end with the world.L.C."	rds "Limited Liability Company," the desi	ignation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
		F
Enter new mailing address, if applicable:		19 - T
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or regis registered agent and/or the new registered office add	stered office address on our record	s, enter the name of the ne
registered agent and/or the new registered office add	ress ucre.	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida	street adaress
		lorida Zip Code
	City	Zip Coae

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 608, 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 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> **Type of Action Cameron Pearce** 3801 S. Congress Ave **MGRM** #315 Remove Austin, TX 78704 Remove Add Remove Remove Remove Remove

If amending any other info	rmation, enter change(s) here: (Attach additional sheets, if necessary.)
• • •	
•	
Dated June 26	2013)
valed	
	Signature of a member or authorized representative of a member
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Brian Cole	
	Typed or printed name of signee

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Filing Fee: \$25.00

SECTION -1 PM 1: 46