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PILED 2015 NOV 30 PN 2: 17 SECKPLANCE OF STATE TALLANASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Advanced Technology & Engineering Consulting Group, LLC
Name of Limited Enability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

For further information concerning this matter, please call:

Khalil YAcoub at (561) 302-8067

Name of Person 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

FILED

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ARTICLES OF AMENDMENT TO SECRETARY OF STATE ARTICLES OF ORGANIZATION ALLAHASSEE, FLORIDA OF

Advanced Technology & Engineering Consulting Group, LLC
(Name of the Limited Liability Company & it now appears on our records.)
(A Florida Limited Liability Company)

(.	A Florida Limited Liability Company)
The Articles of Organization for this Limited Lia Florida document number <u>L13 000083</u>	ability Company were filed on <u>66-10-2013</u> and assigned 468.
This amendment is submitted to amend the follow	wing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:
<u>(Principal office address MUST BE A STREET</u>	'ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>
B. If amending the registered agent and/or the new registered offi	r registered office address on our records, enter the name of the new ce address here:
Name of New Registered Agent:	Khalil YAcouh
New Registered Office Address:	19675 Estvary Dr. Enter Florida street address
	Boca Raton Florida 33498 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
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Filing Fee: \$25.00