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MARRIS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: DOMOTEK LLC
SUBJECT: Name of Limited Liability Company
Name of Limited Dabtiny Company
The enclosed Articles of Amendment and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following
MARCEL D. TERAUS
ECUADOR LAW LLC
Fitm/Company
1001 BRICKELL BAY DR JE.120 Address MARCEL FERAUD & VAHOO. COM E-mail address (to be used for future sharual report notification)
Augress
1/1/AMI TL 33131
City/State and Zip Code
MARCEL FERAUD & YAHOO. COM
E-mail address (to be used for future abnual report notification)
For further information concerning this matter, please call:
MARCEL A FERAUN Name of Person
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Scrifficate of Status Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

Tallahassee, Fl. 32314

2661 Executive Center Circle Tallahussee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DOMOTEK	LLC		
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L			-
The Articles of Organization for this Limited Liability Company Florida document number	were med on _/_	9/12/2013 and	assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company her	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the de-	esignation "LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		_ .	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of	fice address on	our records, enter the nan	ne of the new
registered agent and/or the new registered office address here			
Name of New Registered Agent:			
New Registered Office Address			
	Enter Floru	uda street address	
		, Florida	,
New Registered Agent's Signature, if changing Registered Agent:	City	Zip Cii	ac .
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of n rovided for in Cl	my duties, and I am familiar Thapter 605, F.S. Or, if this de	with and ocument is

Page 1 of 3

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:

MGR = Manager AMBR = Authorized Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
MORM	LIZAR ZAZURU, MAURKIO	1001 BRICKELL BAY DRIVE		
		SOITE 1200	Remove	
		MMM1 FL 33131	🖸 Change	
			🖸 Remove	
			O Change	
			D Add	
			C Remove	
			D Change	
			D Add	
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ctiv	e date, if other than the date of filing:
effec :: If	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
men	it's effective date on the Department of State's records.
eco	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
ie 9	Oth day after the record is filed.
	AUGUST 23 2017
d	101.201
	(0101000000)
	Segnature of a member of authorized representative of a member
	MARCEL D. FERAUD
	$\Lambda \Lambda A R = (-1) \Lambda - T = R A O \Lambda$

Page 3 of 3 Filing Fee: \$25.00

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