Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323) 962-3889

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MYTECHTALENT, LLC

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3/4/2014

COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE	МҮТЕСН	TALENT, LLC		
O O D J E		Name of Lim	rited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm/Company	
		100 W. Broadway Suite	100	
			Address	
		Glendale, CA 91210		
			City/State and Zip Code	······································
		rob.berg@outlook.com		
			to be used for future annual report noti-	ficution)
For fur	ther information co	oncerning this matter, please c	all:	
lmelda	a Vasquez		at () 962-8600 e	xt 7950
	Name of	l'Person	Area Code Daytim	e Telephone Number
Enclose	ed is a check for th	e 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
Cliffon Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE

ALLAHASSEE, FLORIBY

MYTECHTALENT, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liabilit	ty Company	were filed on 11/0	7/2013	and assigned
Florida document number L13000156663	·			
This amendment is submitted to amend the following	g:			
A. If amending name, enter the new name of the	limited liabi	lity company here	:	
Supren Advisors, LLC				
The new name must be distinguishable and end with the words	"Limited Liabi	lity Company," the des	ignation "L1.C" or the a	obreviation "L.L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET AD	DRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX))			
	-			
B. If amending the registered agent and/or re registered agent and/or the new registered office a Name of New Registered Agent:			ur records, <u>enter</u>	the name of the new
New Registered Office Address:			`	
New Negistared Office Address.		Enter Florida	street address	
			Florida	
		City		Zip Code
New Registered Agent's Signature, if changing Regist	ered Agent:			
I hereby accept the appointment as registered age provisions of all statutes relative to the proper an accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this chang	d complete p d agent as pi tered office d	performance of my rovided for in Cha	duties, and I am for pter 605, F.S. Or,	amiliar with and if this document is
	If Chan	ging Registered Agent	, Signature of New Reg	istered Agent

Page 1 of 3

MGR = Manager

To:

3/4/2014 7:56:13 AM P51

13239628300 From: Krienna Deeai

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

<u>l'itle</u>	<u>Name</u>	Address	Type of Action
			□ Remove
	•		
			□ Add
			□ Remove
			Add
			□ Remove
			Add
			☐ Remove
			Add
			Remove
			Add
			Remove

	date, if other than the date of filing:
date thi	is document is filed by the Florida Department of State)
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late thi	February 27 2014

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