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### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: SERGO TEK SERVICES 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:
SERGE JEAN JACQUES  Name of Person
Firm/Company
PQ Box 585183  Address
ORLANDO FL 32858  City/State and Zip Code  SERGE_JEAN JACQUES Q Yacheo "Com  E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)  Let 1 - Le
For further information concerning this matter, please call:
SERGE JEANJA COUES at (407) 321-200-2252  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee \& Certificate of Status \$\Bigcup \$55.00 Filing Fee \& Certificate of Status \$\Bigcup \$\Bigcu

#### 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

TEK SERVICES

(A Florida Limited Liability Company)
the Articles of Organization for this Limited Liability Company were filed on 226/2014 and assigned lorida document number <u>L 140000328</u> 69
this amendment is submitted to amend the following:
SERGO TEK WELDING AND DESTRUCES LACTOR he new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:
Principal office address MUST BE A STREET ADDRESS)
Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)
B. If amending the registered agent and/or registered office address on our records, enter the name of the new egistered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:  Enter Florida street address Florida
City Zip Code
lew 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:

<u>Title</u>	<u>Name</u>	•	Address	Type of Action
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Filing Fee: \$25.00