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(Re	questor's Name)	
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(Do	cument Number)	
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### **COVER LETTER**

	ration Second						
	THIRA S	ystems, LLC					
SUBJECT: _		Name of Lim	ited Liability Company				
The enclosed A	rticles of A	Amendment and fee(s) are sub	mitted for filing.				
Please return all	l correspor	ndence concerning this matter	to the following:				
		Howard A. Gordon					
			Name of Person		•		
		Gordon Consulting Service	es, LLC				
			Firm/Company				
		206 Columbia Drive, Unit	2				
			Address	**************************************	e sant		
		Tampa, Florida 33606				2915 MA	****
			City/State and Zip Code		≖ ان در	AY 2	
		hagordon@msn.com	to be used for future annual report notific		- 설문	۵	
For further infor	rmation co	e-mail address: (	·	:auon)	OF STA	<b>≘</b> 5	
Howard A.Gord	don		813 3635244 at ( )			7	
	Name of	Person		Telephone Number			
Enclosed is a ch	eck for the	e following amount:					
<b>\$25,00 Filin</b>	ıg F <del>ee</del>	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Fiting Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &		

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 OF

GTHIRA Systems, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	· · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited Liability Company  Florida document number	were filed on June 16, 2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
IG Threat Intel Systems, LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	206 Columbia Drive, Unit 2	
Principal office address MUST BE A STREET ADDRESS)	Tampa	
	Florida 33606	The Ba
Enter new mailing address, if applicable:		TANK TANK TO SERVICE S
Mailing address MAY BE A POST OFFICE BOX)		SEE 0
		T S
		77 C C
<ol> <li>If amending the registered agent and/or registered of registered agent and/or the new registered office address here</li> </ol>	_	enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
<del></del>	Enter Florida street address	
	, Floric	la
	City	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	·	
<u>Title</u>	Name	Address	Type of Action
			Add
			□ Remove
			Change
		<u> </u>	Add
			☐ Remove
			Change
	<del></del>		Add Remove
			29 Change 70: Add
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ective date, if other than the date of filing:	(ontional)
n effective date is listed, the date must be specific and cannot be prior to date of filing the:  If the date inserted in this block does not meet the applicable statutory forment's effective date on the Department of State's records.	or more than 90 days after filing.) Pursuant to 605.020
record specifies a delayed effective date, but not an effective he 90th day after the record is filed.	ve time, at 12:01 a.m. on the earlier o
May 25 2015	
Hed Med Del Co	
	ative of a member

Page 3 of 3

Filing Fee: \$25.00