14000156879

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COVER LETTER

	ivision of Corp				
SHD IVCT	RANGEL	, TSAOUSSIS AND TE	ECHNOLOGIES LLC	·	
SUBJECT	•	Name of Lim	ited Liability Company	- 3 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 	
The enclos	ed Articles of A	amendment and fee(s) are sub	mitted for filing.		
Please retu	rn all correspon	dence concerning this matter	to the following:		
		Steven H. Rangel			
			Name of Person		
		RANGEL, TSAOUS	SIS AND TECHNOL	OGIES LLC	
			Firm/Company		
		1029 Hardee Road			
			Address		
		Coral Gables, FL 33	3146		
			City/State and Zip Code		·
		vivianaerangel@gma			
			to be used for future annual re	port notification)	
For further	information co	ncerning this matter, please c	all:		
Steven	H. Rangel			6-7943	•
	Name of	Person	at () Area Code	Daytime Telephone	Number
Enclosed i	s a check for the	e following amount:			
\$25,00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filling Fee & Certified Copy (additional copy is encl.)	osed) C	0.00 Filing Fee, ertificate of Status & ertified Copy dditional copy is enclosed)
	MAILII	NG ADDRESS:	STREET	COURIER ADDR	ESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RANGEL, TSAOUSSIS AND TECHNOLOGIES LLC

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

(11) Wilde Dillings 1	amorney everificates	
The Articles of Organization for this Limited Liability Company	were filed on 10/07/2014	and assigned
Florida document number L14000156879		-
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limited Liab	Pity Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		No.
		5 A
Enter new mailing address, if applicable:		20 SE
(Mailing address MAY BE A POST OFFICE BOX)		THE PROPERTY OF THE PROPERTY O
	<u> </u>	SH W
		10A
B. If amending the registered agent and/or registered of		s, enter the name of the new
registered agent and/or the new registered office address here	<u>e</u> :	
NI CNI DA LA LA		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	
	, Fi	orida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	Car	zip code
I hereby accept the appointment as registered agent and agr 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 my duties, as provided for in Chapter 605,	nd I am familiar with and F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

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:

MGR = Manager

AMBR = Authorized Member Title **Type of Action** Name **Address** MGR Simon Peter Tsaoussis 8325 SW 63 Place Add 🗐 Miami, FL 33143 ____ □ Remove AMBR Simon Peter Tsaoussis 8325 SW 63 Place ■ Add Miami, FL 33143 ☐ Remove ____ 🗀 Add ☐ Remove _____ Add ____ □ Remove □ Add ☐ Remove

☐ Remove

fective date, if other than the date e effective date must be specific, cannot be p	of filing: prior to date of receipt or filed date and can	not be more than 90 days after
		·
e date this document is filed by the Florida D March 2	Department of State)	·
ne date this document is filed by the Florida Dated March 2	Department of State)	

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Filing Fee: \$25.00