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D. SCOTT MAY 1 0 2017



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 13, 2017

KEITH R WESOLOWSKI, ESQ. 640 ELLICOTT STREET, SUITE 403 BUFFALO, NY 14203

SUBJECT: EXOSKELETON TECHNOLOGIES, LLC

Ref. Number: W17000032249

We have received your document for EXOSKELETON TECHNOLOGIES, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Document number listed on application doesn't match name on application.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijeaux Regulatory Specialist

Letter Number: 917A00007216

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ANASSEE, FLORIDA

COVER LETTER

		tration Secti on of Corpo					
SUBJEC		xoskeleton T	echnologies, LLC				
SUBJEC	.1: _		Name of Limit	ed Liability Compar	ıy		
The enclo	osed A	articles of An	nendment and fee(s) are subn	nitted for filing.			
Please ret	turn al	I correspond	ence concerning this matter to	o the following:			
			Keith R. Wesolowski, Esq.				
				Name of Perso	n		
			Wesolowski Law Group, P.	C.			
				Firm/Compan	У		
			640 Ellicott Street, Suite 40	3			
	Address						
			Buffalo, NY 14203				<u> </u>
				City/State and Zip	Code		
		_	keithrwesolowski@gmail.co				語ること
				be used for future a	mnual report noti	fication)	留 8 四
For furthe	er info	rmation cond	cerning this matter, please cal	ll:			105 P
Keith R.	Weso	lowski, Esq.		716 at (208-7080		000 32
		Name of Po	erson	Area Cod	e Daytim	e Telephone Number	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Enclosed	is a c	heck for the f	ollowing amount:				
□ \$25.0	00 Fili	ng Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Certified Co (additional cop	ру	Certified (e of Status &

MAILING ADDRESS:

TO:

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

Exoskeleton Technologies, LLC		
(<u>Name of the Limited L.</u> (A F	iability Company as it now appears on our records.) lorida Limited Liability Company)	.
he Articles of Organization for this Limited Liabili	ity Company were filed on January 6, 2015	and assigned
lorida document number L15000002973	·	
his amendment is submitted to amend the followin	ng:	
. If amending name, enter the new name of the	limited liability company here:	
Exoskeletal Technologies, LLC		
he new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."
nter new principal offices address, if applicable		
• • •		
<u>Principal office address MUST BE A STREET A</u>	DDRESS)	
Inter new mailing address, if applicable:		
Muiling address MAY BE A POST OFFICE BOX	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter	the name of the
egistered agent and/or the new registered office	aduress nere:	
		当夏コ
Name of New Registered Agent:		3841 下
		治法 ® F
New Registered Office Address:		1115h -p D
	Enter Florida street address	1637 w
	, Florida	宣言 29
_	City	Zin 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 = Manager

AMBR = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
			□ Add
			Remove
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ctive date if other than t	the date of fili	na•		(antional	n
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e: If the date inserted in this iment's effective date on the			ble statutory filing i	equirements, this dat	e will not be listed 국의 🥦
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ecord specifies a delay	ved effective	date but not	an effective tin	ne at 12·01 a.m.	on the earlier
ne 90th day after the r	record is filed	date, but not i.	an enective th	ie, at 12.01 a.iii	. SSS
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April 4		2017			PH S
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00