9/10/2015



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:				
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CHATHAM ENGINEERING TECHNOLOGIES LLC

Certificate of Status Certified Copy 1 Page Count 06 Estimated Charge \$55.00

SEP 1 4 2015

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Corporate Filing Menu

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COVER LETTER

TO: Registrat Division	n Section Corporations								
CHA	THAM ENGINEERING TECHNOLOGIES LLC								
SUBJECT: Name of Limited Liability Company									
The enclosed Artic	s of Amendment and fee(s) are submitted for filing,								
Please return all co	espondence concerning this matter to the following:								
	Cheyenne Moseley								
	Name of Person								
	Legalzoom.com, inc.								
	Firm/Contputy								
	100 W. Broadway Suite 100								
	Address								
	Glendale, CA 91210								
	City/State and Zip Code								
	reid.chatham@gmail.com E-mail address: (to be used for fluture annual report notification)								
For further informa	on concerning this matter, please call:								
Imelda Vasquez 323 962-8600 ext 7950 Name of Person Area Code Daytime Telephone Number									
N	me of Person Area Code Daytime Telephone Number								
Enclosed is a check	or the following amount:								
□ \$25.00 Filing F	Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee. 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

CHATHAM ENGINEERING TECHNOL			
(Name of the Limited Lighility (A Florida I	Company as it our appears on our records.) imited Liability Company)		
The Articles of Organization for this Limited Liability Con	mpany were filed on 1/12/2015	and	l assigned
Florida document number L15000006781	,		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company here:		
Hermes Messenger, LLC			
The new name must be distinguishable and end with the words "Limi	ted Liability Company," the designation "LLC" or t	he abhreviete	sn "L.L.C."
Enter new principal offices address, if applicable:			
- · ·	· · · · · · · · · · · · · · · · · · ·		
(Principal office address MUST BE A STREET ADDRE	(22)		
(Principal office address MUST BE A STREET ADDRE			
(Principal office address MUST BE A STREET ADDRE	<u>(SS)</u>		
Enter new mailing address, if applicable:			
Enter new mailing address, if applicable:			
(Principal office address MUST BE A STREET ADDRE Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			-1
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registe	red office address on our records, ent		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	red office address on our records, ent		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office addre	red office address on our records, ent		ne of the
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Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office addressistered agent and/or the new registered office addressistered agent.	red office address on our records, <u>ent</u>	ler the day	ne of the

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 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	Name	Address	Type of Action			
			□ Add			
			□ Remove			
			☐ Remove			
			□ Remove			
			□ Add			
			☐ Remove			
			□ Add			
			☐ Remove			
			□ Add			
			Remove			

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Filing Fee: \$25.00

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