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(Cit	y/State/Zip/Phor	ne #)
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Y. SCOTT

Y. SCOTT

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COVER LETTER

TO:	Registration Se Division of Cor						
SUBJEC		GUARD SERVICES LLC					
SOBJEC		Name of Lim	nited Liability Company				
The encl	losed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please re	eturn all correspo	ndence concerning this matter	to the following:				
		Charles J Hacker Jr					
			Name of Person		_		
		The Siege Network LLC			က္က ကြည်က	2021	
			Firm/Company		- (- 1) - (- 2)	A0!!	***
		7444 canvasback dr				42 AOH 1202	
			Address		- 스의 크리	P	;
		New Port Richey, FL 34	654		STATE OF THE PARTY	2: []	-,
		charleshackerjr@gmail.c	City/State and Zip Code om		_ '''		
		E-mail address: (to be used for future annual report notifi	cation)			
For furth	ner information co	oncerning this matter, please c	all:				
Charles	J Hacker Jr		813 8104592				
	Name of	f Person	at () Area Code Daytime	Telephone Number	er		
Enclosed	is a check for th	ne following amount:					
\$25.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Stat		
		ING ADDRESS: ation Section	STREET/COURIE Registration Section				

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

NUTIKET GUARD SERVICES LLC		
(<u>Name of the Limited Li</u> (A F)	ability Company as it now appears on our rec orida Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability	ty Company were filed on 02/27/2015	and assigned
Florida document number L15000036652	·	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The Siege Network LLC		
The new name must be distinguishable and contain the words '	'Limited Liability Company," the designation "I	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	NOT AMENDING	
Principal office address MUST BE A STREET AL	ODRESS)	202 \$3
		23 8 TI
		N
Enter new mailing address, if applicable:	NOT AMENDING	77 - Trees
Mailing address MAY BE A POST OFFICE BOX	2	
		m -
B. If amending the registered agent and/or registered agent and/or the new registered office a		ords, enter the name of the ne
egistered agent und of the new registered office		
Name of New Registered Agent:	OT AMENDING	
New Registered Office Address:		
	Enter Florida street add	dress
	,	Florida
	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 =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AR	Susan Widen	1752 Tin Smith Cir	
			Add
		LUTZ, FL 33559	
			■ Remove
			Change
			□ Add
			□ Remove
			☐ Change
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<u></u>			□ Add
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			Change

This Limited Liability Company has been formed f	or the purpose of conducting business in Florida.
	<u></u>
	· · · · · · · · · · · · · · · · · · ·
	(optional) rior to date of filing or more than 90 days after filing.) Pursuant to 605.6 blicable statutory filing requirements, this date will not be listed that
ne 90th day after the record is filed.	not an effective time, at 12:01 a.m. on the earlie
ed 17th November. 20 Register Register Avage Signature of a member or an	21
su : /	- Last

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00