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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	SIYA SOL Name of Lim	LUTIONS, LLC	_
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Levin P.	Donaghy, Esqui	æ
	Donag	Jhy Law Firm/Company	
	195 Wekiva S	prings Rd., Suite	224
	Longwood	FL 32179 City/State and Zip Code	
		onaghy@gmail. Co be used for future annual report notific	
For further information co	oncerning this matter, please ca	all:	
Keyin Do	raghy Person	at (407) 478. 6 Area Code Daytime	Telephone Number
Enclosed is a check for th	e following amount:		,
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & 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 TO ARTICLES OF ORGANIZATION OF

SIYA SOLUTIONS, LLC
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address: Enter Florida street address
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 = Ma AMBR = Au	anager athorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MMBR	SIYA TECHNOLOGY, LIC	3058 Falconhill Drive Apopka, FL 32712	Add
		- Propriet	Remove
			Change
MMBR	ALACOM, LLC	1769 Scrub Jay Rd.	T Add
		Apopka, FL 32703	☐ Remove
			Change
			Remove
			Change
			Add
			□ Remove
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ve date, if other than	the date of filir	~ OSI	30/20	\	ational)	
ctive date is listed, the date	must be specific an	id cannot be prior t	o date of filing or r	nore than 90 days at	fter filing.) Pursuant to	0 605.0
If the date inserted in thi ent's effective date on th	is block does not the Department of	meet the applica State's records.	ble statutory IIII	ig requirements, t	inis date will not be	nsted
	•					
ord specifies a dela	yed effective	date, but not	an effective	time, at 12:01	1 a.m. on the e	arlier
90th day after the						
		0-17				
May 31		2011	-:			
J						
	_	30				
	Signatur	member or author	ivad rangeantetis	e of a member		_

Page 3 of 3

Filing Fee: \$25.00