

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

L15000075341

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((H15000108532 3)))



H150001085323ABCZ

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To:

Division of Corporations
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 2015 MAY -4 AM 8:29
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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Email Address: _____

15 MAY -4 AM 10:00

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 BINARY SERVICES LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
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MAY 05 2015
 J. HARRIS

Electronic Filing Menu

Corporate Filing Menu

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Tax Mail #1115 200/005-1-2

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Binary Services 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 4/29/2015 and assigned Florida document number 115000075341

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 end with the words "Limited Liability Company," the designation "LLC," or the abbreviation "L.L.C."

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
205 MAY - 4 AM 8:29
or abbreviations

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

Florida

Cin'

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

Tax Credit # H 15 000 1085323

MAY-04-2015 15:13

608 827 5501

608 827 5501 P.003

Tax Audit #1715 0001085323

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MBR	BHAWNA MANIK	4651 SLISBURY ROAD STE 400	<input type="checkbox"/> Add
		JACKSONVILLE, FL 32256	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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TALLAHASSEE, FLORIDA

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Remove
Add
Remove

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D. If amending any other information, enter change(s) here: *(attach additional sheets, if necessary)*

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (608.0207 (3)(b))

Dated 05/01/2015

Sundeepa

Signature of a member or authorized representative of a member

Sundeepa Bujaj, Member

Typed or printed name of signer

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