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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500
ACCOUNT NO. : 12000000195
REFERENCE : 038503 8057092
AUTHORIZATION: Spellice mon
COST LIMIT : \$ 25.00
ORDER DATE : January 24, 2018
ORDER TIME : 2:48 PM
ORDER NO. : 038503-010
CUSTOMER NO: 8057092
DOMESTIC AMENDMENT FILING
NAME: GSOURCE TECHNOLOGIES, LLC
EFFECTIVE DATE:
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Roxanne Turner -- EXT# 62969

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GSOURCE TECHNOLOGIES, LLC		
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our records.) oida Limited Liability Company)	
The Articles of Organization for this Limited Liabilit Fiorida document number	y Company were filed on 07 17/2015	and assigned
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the l	imited liability company here:	
The new name must be distinguishable and contain the words "	Limited Liability Company," the designation "ELC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		The state of the s
(Principal office address MUST BE A STREET AD	DRESS)	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)		5
B. If amending the registered agent and/or re registered agent and/or the new registered office a	gistered office address on our records, y ddres <u>s here</u> :	enter the name of the new
Name of New Registered Agent:		
New Registered Office Address		
	Enter Florida street address	
	Florie	da
	Cay	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. Thereby 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>	Name	Address	Type of Action
AMBR	Monojit Dutta Gupta	13065 Southwest 26th Street	
		Miramar, FL 33027	Remove
			Change
			Add
			☐ Remove
			□ Change
			Change Change
			Change 5
			CD-Add OD
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			Remove
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it an eri Note:	(optional) (control of filing) (optional) (control of filing) (optional) (control date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursual If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not lent's effective date on the Department of State's records.	nt to 605 0 be listed	207 (3 Hb) as the
he red The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	earlier	of:
Dated	·		
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Typed or printed name of signee

Filing Fee: \$25.00