## 1600013332

(Re	equestor's Name)	-
(Ac	ldress)	
(Ac	dress)	
(Ci	ty/State/Zip/Phone	<b>= #</b> }
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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06/14/16--01803--002 \*\*25.00

K. SALY EXAMINER JUN 14

## **COVER LETTER**

Division of Corp						
Voltaire Sys	tems, LLC					
Sobole 1.	Name of Limit	ted Liability Company				
	Amendment and fee(s) are subnutered	-				
	Gregory Duggan					
		Name of Person				
	Voltaire Systems, LLC					
	Firm/Company					
	2900 W. Orange Avenue, Suite 130					
		Address	·			
	Apopka, FL 32703					
		City/State and Zip Code				
	greg@voltairesys.com	o be used for future annual report notif	ication)			
For further information co	ncerning this matter, please cal	-				
Melissa Richards		407 814-4866 at ()				
Name of	Person	Area Code Daytime	Telephone Number			
Enclosed is a check for the	e following amount:					
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee,  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**

FILED
2016 JUN 13 PM 2: 10
MILIZALARY DE STATE

Voltaire Systems, LLC

(Name of the Limited Li (A Fl	ability Company as it now appears on our records.) lorida Limited Liability Company)	ORIOL ORIOL	
The Articles of Organization for this Limited Liability Florida document number L16000013332	ity Company were filed on 01/22/2016	and assigned	
This amendment is submitted to amend the following	g:		
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" of	or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	:		
(Principal office address MUST BE A STREET AL	DDRESS)		
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 a	registered office address on our records,		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
	City	Zip Code	
New Registered Agent's Signature, if changing Regist	tered Agent:		
I hereby accept the appointment as registered ago	ent and agree to act in this capacity. I furth	her 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>	Address	Type of Action
MGR	Gregory Duggan	2900 W. Orange Avenue	<b>■</b> Add
		Suite 130	□ Remove
		Apopka, FL 32703	☐ Change
MGR	Kristen Bartch Knight	2900 W. Orange Avenue	
		Suite 130	<b></b>
		Apopka, FL 32703	_ □ Change
	<del></del>		
			Remove Chan 13d Ph 3
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ective date, if other than t	he date of filing:			(optional)	
effective date is listed, the date in this	must be specific and cannot		ng or more than 90 day	s after filing.) Pursuant	
ument's effective date on the			. ,g		
record specifies a delay he 90th day after the r	red effective date, lecord is filed	but not an effec	tive time, at 12	:01 a.m. on the 6	earlier o
ne soun day area ene i	ccord is incu.				
ed June 10	. 2	GII.			
	Signature of a member	<u></u>			
	754 Day 100				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00