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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Spoke to Ms. Tiffong, she kibala like to go ahad with the nome change. 6/21/25
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Office Use Only



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COVER LETTER

TO:

Registration Section
Division of Corporations

Rent a Sale SUBJECT:	sforce Admin, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Tiffany N Spencer		
		Name of Person	
	Tech Forward Solutions		
		Firm/Company	
	5829 Campbellton Rd SW	#104-169	
	·- ·- ·-	Address	
	Atlanta, GA 30331		
		City/State and Zip Code	
	tiffany@techforward-soluti		
	E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	
Tiffany Spencer		407 244-0210 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	(1) \$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 S Division of C P.O. Box 632	Section Corporations	Street Address: Registration Se Division of Courte Centre of The	rporations
Tallahassee,			e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rent a Salesforce Admin, 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 $\frac{01/18/2023}{1}$ and assigned Florida document number __L16000085456 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Tech Forward Solutions, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 931 N State Rd 434 Enter new principal offices address, if applicable: Ste #120-313 (Principal office address MUST BE A STREET ADDRESS) Altamonte Springs, FL 32714 5829 Campbellton Rd SW Enter new mailing address, if applicable: #104-169 (Mailing address MAY BE A POST OFFICE BOX) Atlanta, GA 30331 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 City

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>	Address	Type of Action
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			□Remove
			□Change
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ective date, if other than the date i effective date is listed, the date must be sp	of filing:			(c	optional)	
i effective date is listed, the date must be space. If the date inserted in this block d	pecitic and cannot b	e prior to da	ate of filing or me	re than 90 days	after filing.) Pur	suant to 605.029 not be listed:
cument's effective date on the Departs	ment of State's re	ecords.	sanatory ming	requirements	((),, O	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
record specifies a delayed eff	ective date, b	ut not ar	n effective ti	me, at 12:0	01 a.m. on	the earlier
he 90th day after the record	s filed.					
18th, January ted	2023					
Tiffany Sper	icer		-			
Sign:	ature of a member of	or authorize	d representative	of a member		_

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Filing Fee: \$25.00