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TO:

TO:	Registration Se Division of Cor		•				
SUBJEC	Control Un	ion Certifications LLC					
SUDJE	-1; <u> </u>	Name of Lim	ited Liability Company				
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please re	eturn all correspo	ondence concerning this matter	to the following:				
		Duris L. Holmes					
			Name of Person				
		Deutsch Kerrigan, L.L.P.					
			Firm/Company		ZESE	5	
		755 Magazine St.					
			Address			1 28	
		New Orleans, LA 70130				=	ì
			City/State and Zip Code			<u>د</u> ې	
		dholmes@deutschkerrigan.			$\frac{1}{2\pi}$.	CI (II)	
For furth	er information c	e-mail address: (oncerning this matter, please ca	to be used for future annual report notifi all:	cation)			
Duris L.	Holmes		504 593-0659				
	Name o	f Person		Telephone Number			
Enclosed	l is a check for th	ne following amount:					
= \$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status		
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ation Section on of Corporations ox 6327	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Control Union Certifications LLC					
(<u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our reco a Limited Liability Company)	rds.)			
The Articles of Organization for this Limited Liability C Florida document number L16000126475	Company were filed on July 5, 2016	and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lim	ited liability company here:				
Control Union Certifications North America, LLC					
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LI	LC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDI	RESS)				
		<u> </u>			
Enter new mailing address, if applicable:					
Mailing address MAY BE A POST OFFICE BOX)		14. 07			
Maning undress MAT DE ATOST OF THE BOXY		14 38 C			
		- 			
B. If amending the registered agent and/or regis	stered office address on our recor	ds enter the name of the ne			
registered agent and/or the new registered office add		us, enter the name of the ne			
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
		Florida			
	City	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

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
			□ Add
			□ Remove
			□ Change
			□ Remove
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Effective date, if other than the fan effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the I	block does not meet	the applicable stati	filing or more than 9 utory filing require	(optional) 0 days after filing.) ments, this date v	Pursuant to vill not be	605.02 listed	207 as
ne record specifies a delaye The 90th day after the rec	ed effective date cord is filed.	, but not an ef	fective time, at	: 12:01 a.m. c	n the ea	arlier	0
Dated July 25)16 /					
4	_21+						
A	Signature of a memb	per or authorized rep	presentative of a mem	ber		.	

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Filing Fee: \$25.00