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## **COVER LETTER**

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CHE	JECT:	TELETECH	DRILL LLC			
3016	ice i i		Name of Limit	ed Liability Company		Teller in the second of the se
The e	nclosed	Articles of A	mendment and fee(s) are subn	nitted for filing.		
Please	e return	all correspond	dence concerning this matter to	o the following:		
			MARILI CANCIO			
				Name of Person		
			MARILI CANCIO JOHNS	ON PA		
				Firm/Company		,
			1395 BRICKELL AVENU	E SUITE 650		
				Address		
			MIAMI, FLORIDA, 33131			
				City/State and Zip Code	•	
			marili.cancio@cjelaw.com  E-mail address: (to	be used for future annua	report notification	11)
For fu	ırther in	tormation con	cerning this matter, please cal		·	,
Maril	li Canci	o		786 80	02-2332	
		Name of P	erson	Area Code	Daytime Tele	phone Number
Enclo	sed is a	check for the	following amount:			
<b>\$</b> 2	25.00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee Certified Copy (additional copy is en		☐ \$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

nany as it now appears on our records.) I Liability Company)	ad the first of the fill the control of the control
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bility company here:	
oility Company," the designation "LLC" or	the abbreviation "L.L.C."
80 SW 8th Street suite 2000	
Miami, Florida, 33130	
80 SW 8th Street suite 2000 Miami, Florida, 33130	
office address on our records, e	enter the name of the n
<u>re</u> :	
	<u> </u>
Enter Florida street address	
	la
	80 SW 8th Street suite 2000  Miami, Florida, 33130  80 SW 8th Street suite 2000  Miami, Florida, 33130  office address on our records, ere:

## New Registered Agent's Signature, if changing Registered Agent:

TELETECH DDU L LLO

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
			□ Remove
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Filing Fee: \$25.00