L16000181726

(Requestor's Name)
(Address)
(Address)
(/ loui 655)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Excument Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800367921928

06/17/21--01012--023 **25.00

2021 JUN 17 PH 12: 15

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HIGH TECHNOLOGY FIRE AND SECURITY			
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	iy as it now appears on our records.) iability Company)		
The Articles of Organization for this Limited Liability Company v Florida document number L16000181726	were filed on <u>09/26/2016</u> an	d assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil		919	
The new name must be distinguishable and contain the words "Limited Liabilit	·		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
(Frincipul Office unuress MOST BE A STREET ADDRESS)	 	3 : 1	
		<u> 10</u>	
	H	5	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office adapted and/or the new registered office address here: Name of New Registered Agent:	ddress on our records, <u>enter the name of th</u>	e new registered	
New Buristand Office Address.			
New Registered Office Address:	Enter Florida street address		
	, Florida		
	City Zip C	Code	
New Registered Agent's Signature, if changing Registered Agent:		,	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my duties, and I am familia rovided for in Chapter 605, F.S. Or, if this	r with and document is	

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
AMBR	JULIAN PABON	1203 FOSTERS MILL LANE	■Add
		BOYNTON BEACH, FL 33436	□Remove
			□Change
			Remove
			Ç= □Change
			DAEd
			□R efi nove
			□ Change
			□Add
			□Remove
			Change
			□Ađd
			□Remove
			☐ Change
			□Add
			□Remove
			□Change

					
				-	
				<u>-</u>	
	<u></u>		<u> </u>		
					<u> </u>
			 -		191
					
	·				<u></u>
	 				
				:	25:
				•	ज
					
fective date, if other than the d in effective date is listed, the date must	late of filing:			(optional)	705.004
ote: If the date inserted in this bloom	ck does not meet the	applicable statuto	ing or more than 90 ory filing requiren	days after filing.) ents, this date v	Pursuant to 605.020 will not be listed a
ocument's effective date on the Dep	partment of State's	ecords.			
ecord specifies a delayed effective	date but not an effe	ective time, at 12:6	lam on the earl	ier of: (b) Tho	e 90th day after the
is filed.					,
ILINE OTH	202	ļ			
JUNE 9TH ated	,	·			
	1				
	4		entative of a memb		

Filing Fee: \$25.00