116000220339

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COVER LETTER

TC	P: Registration Security Division of Corp.		^	
	RHLP Tecn		. '	
30	ВЈЕСТ:		ited Liability Company	
Ple	ease return all correspo	ndence concerning this matter	to the following:	
		Hana-li Pendery		
			Address Clearwater, FL 33755 City/State and Zip Code Hana-li@hanali.com E-mail address: (to be used for future annual report notification) erning this matter, please call: at (727 at (238-5754) Area Code Daytime Telephone Number	
			Firm/Company	Code annual report notification) 238-5754 Daytime Telephone Number 3 Fee & \$60.00 Filing Fee, Certificate of Status & Sty is enclosed) Certified Copy
		411 Cleveland Street #134		
		· · · · · · · · · · · · · · · · · · ·	Address	
		Clearwater, FL 33755		
			City/State and Zip Code	
		Hana-li@hanali.com		
		E-mail address: (1	to be used for future annual report notific	cation)
Fo	r further information co	oncerning this matter, please ca	all:	
Ste	even Hayes		at ()	
	Name of	f Person	Area Code Daytime	Telephone Number
En	closed is a check for th	ne following amount:		
	\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

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

RHLP Tecnology, LLC			
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.) ability Company)		
The Articles of Organization for this Limited Liability Company	were filed on December 5, 2016	and assigned	
Florida document number L16000220339			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	lity company here:		
RHLP Technologies, LLC			
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or the abb	reviation "L.L.C."	
Enter new principal offices address, if applicable:			_
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>	
		9 C	
		16 DEC 14	
Enter new mailing address if applicables		<u> </u>	
Enter new mailing address, if applicable:		3.1	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		7 P	
,		<u> </u>	_
		·	
B. If amending the registered agent and/or registered off	ice address on our records, <u>enter t</u>	he name of the	e nev
registered agent and/or the new registered office address here	•		
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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

$ \dot{M}GR = M $ $ AMBR = A$	lanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
			☐ Change
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	<u> </u>		
(If an e	tive date, if other than the date of filing:	to 605.020 be listed as	7 (3)(b s the
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	earlier o	f:
Date	December 9, 2016		
Date	1 St. Hun		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00