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COVER LETTER

	gistration Sec vision of Corp			
SUBJECT:	Crac	e Advertising, LLC		
SOUTH TO	44		ited Liability Company	
The enclose	d Articles of A	amendment and fec(s) are sub	mitted for filing.	
Please return	ı all correspor	dence concerning this matter	to the following:	
			Christopher Mattice	
			Name of Person	
			Crace Advertising, LLC	
			Firm/Company	
		1	898 Grey Falcon Cir SW	
			Address	
			Vero Beach, FL 32962	
			City/State and Zip Code	
			accounts@cracetech.com to be used for future annual report no	liteston
For further i	nformation co	ncerning this matter, please or		inication,
Christoph	er Mattice		at (777) 333 - 913	31
	Name of	Person		ne Telephone Number
Enclosed is	a check for the	following amount:		
⊠ \$25,001	filing Fee	□ \$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 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

Crace Adver		
(Name of the Limited Liahility Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v	were filed onFebruary 02, 2017	and assigned
Florida document numberL17000026487		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
Crace Tech, LLC		
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:	iter new principal offices address, if applicable: 3725 10th Court, Vero Beach, FL 32960	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	3320 Cardinal Dr, #644094, Verd	Beach, FL 32964
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off		the name of the new
registered agent and/or the new registered office address here		5
		LLC.
Name of New Registered Agent:		- -
New Registered Office Address:		- X X X
	Enter Florida street address	W-< - L
	, Florida	_ <u>₹</u> T
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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
AMBR	Christopher Mattice	1898 Grey Falcon Cir SW, Vero Beach, FL 32	?962 □ Add
			Remove
			⊠ Change
			□ Remove
			☐ Change
			Add
			Remove
			Change
			🗖 Add
			🗆 Remove
			Change
 ,			
		☐ Remove	
			Change
			□ Remove
			FI Change

D. If amending any other information, enter change(s)	nete. (And Andahonde sneets, y necessary.)
	<u></u>
	PAL S
	AH MA
· · · ·	SSEE, FLOR
	<u> </u>
E. Effective date, if other than the date of filing:	(optional)
(If an effective date is listed, the date must be specific and cannot be	prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(biplicable statutory filing requirements, this date will not be listed as the
if the record specifies a delayed effective date, but (b) The 90th day after the record is filed.	t not an effective time, at 12:01 a.m. on the earlier of:
Dated 4/27/19 . 20	16.
Dated	authorized representative of a member
Signature of a member of	пополиса тергеления сога телист
Chris	topher Mattice

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Typed or printed name of signee

Filing Fee: \$25.00