## 117000032330

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## **COVER LETTER**

то:	Registration Se Division of Cor			
CHRIC	OVTEK SC	DLUTION LLC		
SUBJE	SC1;		ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Rajalakshmi Ramalingam		
			Name of Person	
		OVTEK SOLUTION LLC		
			Firm/Company	<del></del>
		9558 Islamorada Ter		
			Address	
		Boca Raton, Fl-33496		
			City/State and Zip Code	. <u></u>
		rajiram81@gmail.com		
		E-mail address: (t	o be used for future annual report notifica	ation)
For fur	ther information co	oncerning this matter, please ca	ill:	
Rajalal	kshmi Ramalingan	1	954 8307545	
	Name of	Person	at () Area Code Daytime T	elephone Number
Enclose	ed is a check for th	e following amount:		
\$25	5.00 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

OVTEK SOLUTION LLC	
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L17000032330	were filed on February 09, 2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
OVTEK SOLUTIONS LLC	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	9558 Islamorada Ter
(Principal office address MUST BE A STREET ADDRESS)	Boca Raton, FL - 33496
Enter new mailing address, if applicable:	9558 Islamorada Ter
(Mailing address MAY BE A POST OFFICE BOX)	Boca Raton, FL 33496
··· <del></del>	
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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ad	ldress
		, 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. Of 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

Page 1 of 3

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
MGR	Rajalakshmi Ramalingam	9558 Islamorada ter	■ Add
		Boca Raton, FL 33496	□ Remove
			_ □ Change
			□ Add
			☐ Remove
			☐ Change
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If the date inserted in this block does n	not meet the applicable statutor	ng or more than 90 days after to you filling requirements, this	date will not be lister
ent's effective date on the Department	of State's records.		
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cord specifies a delayed effective 90th day after the record is file	ed.	uve time, at 12:01 a.	m. on the earlie
<b>.</b>			
February 22			
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Signature o	of a member or authorized represe	ntative of a member	T T
~. <b>G</b>	11	The same	٠
Rajalakshmi Ramalingam	1/		28 0

Filing Fee: \$25.00