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COVER LETTER

SUBJECT:	TECN	O IT USA, LLC		
	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
		CARLOS E ZILLI		
		Name of Person		
		TECNO IT USA, LLC		
		Firm/Company		
	77	7 BRICKELL AVE SUITE 500		
		Address		
		MIAMI, FL 33131		
	<u> </u>	City/State and Zip Code		
	ezilli@redlinescm.com			
	E-mail address: (to be used for future annual report noti-	fication)	
For further information of	concerning this matter, please c	all:		
CAR	LOS E ZILLI	305 988-6006		
Name o	of Person	at () Area Code Daytime	e Telephone Number	
Enclosed is a check for the	he following amount:			
\$25.00 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:

TO:

Registration Section Division of Corporations

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**

(Name of the Lin			
Chang of the Lin	nited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Clorida document number <u>L17000073763</u>	Liability Company were filed on	04/03/2017	and assigned
his amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability company h	ere:	
he new name must be distinguishable and contain the	words "Limited Liability Company," the	lesignation "LLC" or the	c abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:		
Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	E BOX)		
	-	·	
	d/or registered office address or office address here:	our records, ent	er the name of the
3. If amending the registered agent and egistered agent and/or the new registered of New Registered Agent:	d/or registered office address or office address here: ALEXANDRE ARAUJO SANTO		er the name of the
egistered agent and/or the new registered of	office address here: ALEXANDRE ARAUJO SANTO 777 BRICKELL AVE SUITE 50	OS O	er the name of the
Name of New Registered Agent:	ALEXANDRE ARAUJO SANTO 777 BRICKELL AVE SUITE 50 Enter Flo	OS) rida street address	
Name of New Registered Agent:	office address here: ALEXANDRE ARAUJO SANTO 777 BRICKELL AVE SUITE 50	OS O	

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
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	CARLOS E ZILLI	777 BRICKELL AVE SUITE 500	
		MIAMI, FL 33131	■ Remove
			Change
<u>-</u>			
			Remove
			Change
			Remove
			□ Change
			Add
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			Change
			☐ Remove
			17 dd 1
			Remover

-1

Fective date, if other than the date of filing: (optional) In 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 605.02 Figure (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed scument's effective date on the Department of State's records. For eccord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier The 90th day after the record is filed. Signature of a member or authorized representative of a member CARLOS E ZILLI Typed or printed name of signace	•			
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Page 3 of 3

Filing Fee: \$25.00