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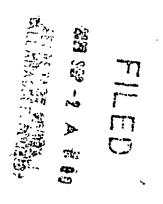
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COVER LETTER

ГΟ:

Registration Section Division of Corporations

	te Imaging, LLC	•			
CDJECI:	Name of Lim	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Katherine A. Seiler				
		Name of Person			
	Trident Elite Imaging, LL0	С			
		Firm/Company			
	10114 Owl Head Circle				
	Address				
	Port Charlotte, FL 33981				
		City/State and Zip Code			
	KathySeiler@TridentElitel	maging.com			
	E-mail address: (to be used for future annual report not	ification)		
or further information c	oncerning this matter, please c	all:			
Catherine A. Seiler		941 830-3620 at ()			
Name o	f Person	Area Code Daytin	ne Telephone Number		
inclosed 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 Registration S Division of C P.O. Box 632 Tallahassee,	Section Sorporations 27	Street Address: Registration Se Division of Cor The Centre of 7 2415 N. Monro Tallahassee, FI	rporations Fallahassee oe Street, Suite 810		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Trident Elite Imaging, LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited l	any as it now appears on our records.) Liability Company)
ne Articles of Organization for this Limited Liability Company	were filed on and assigned
orida document number L17000140389	
is amendment is submitted to amend the following:	
If amending name, enter the new name of the limited liab	pility company here:
e new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	10114 Owl Head Circle
Principal office address MUST BE A STREET ADDRESS)	Port Charlotte, FL 39881
nter new mailing address, if applicable:	10114 Owl Head Circle
failing address MAY BE A POST OFFICE BOX)	Port Charlotte, FL 39881
. If amending the registered agent and/or registered office a	المرسا المرسا
ent and/or the new registered office address here:	
Name of New Registered Agent:	G of the state of
New Registered Office Address:	(Fig.) T (Fig.) (
	Enter Florida street address
	, Florida

cw Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is sing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability ompany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

f amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added r removed from our records:

AGR = Manager AMBR = Authorized Member

<u>`itle</u>	<u>Name</u>	Address	Type of Action
мGR ———	Katherine A. Seiler	10114 Owl Head Circle	
		Port Charlotte, FL 33981	□Remove
			≣ Change
MGR Michael C Seiler	Michael C Seiler	10114 Owl Head Circle	⊐Add
		Port Charlotte, FL 33981	⊟Remove
			■Change
			[] Change
			□Add
			Change
			□Remove
			□Change
			⊡Add
			□Remove
			□Change

		
		
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ate of filing:	(op1	tional)
late, but not an effective time, at	12:01 a.m. on the earlier of: ((b) The 90th day after the
2020		
1 1 1 2		
P A Julia		
gnature of a member or authorized re	epresentative of a member	
b Signal C	be specific and cannot be prior to date and cannot be prior to date and cannot be prior to date and date applicable state and the state and th	the specific and cannot be prior to date of filing or more than 90 days after the does not meet the applicable statutory filing requirements, the partment of State's records. I date, but not an effective time, at 12:01 a.m. on the earlier of:

D.