L17000202618

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	: #)
PICK-UP	Mait	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

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2011 NOV 13 PH 12: 37
SECRE FARY OF STATE
SECRE FLORIDA

NUV 14 2017

COVER LETTER

TO: . Registration Sec Division of Corp			
SUBJECT: Rod	tech Compu	ter Repair LL	<u>-C</u>
	Name of Lim	ited Liability Company	
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
		nunie D Redriquez Name of Person	<u>.</u>
	_	Computer Repair	<u> </u>
	313 Palm K	ey Cir Apt 307 Address	
	Brandon	FL 33511	
	ratechcan E-mail address: (City/State and Zip Code Duters e cymoil con to be used for future annual report notific	partion)
For further information co	ncerning this matter, please ca		
Stephanie Name of	Rodniguez Person	at (72-7) 342 4 Area Code Daytime	248 Telephone Number
Enclosed is a check for the	e 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 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

FILED
2017 NOV 13 PH 12: 37
FALLAHASSEE, FLORIDA

Rodtech Computer Repair LC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

This amendment is submitted to amend the follow	ing:
A. If amending name, enter the new name of th	ne limited liability company here:
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:
(Principal office address MUST BE A STREET)	ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	2X)
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>enter the name of the new</u> e <u>address here</u> :
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:	registered office address on our records, <u>enter the name of the new</u> e <u>address here</u> :
registered agent and/or the new registered offic	e address here:
registered agent and/or the new registered offic Name of New Registered Agent:	registered office address on our records, enter the name of the new re address here: Enter Florida street address

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, 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 Stephante D Rodriguez 313 Palm Key circle Broaden - Add HGR'S Name was entered ☐ Remove _□ Change □ Add □ Remove _□ Change □ Add ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove _□ Change

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fective date, i	f other than the date	e of filing:			(optiona	1)
ote: If the date	s listed, the date must be s inserted in this block d	loes not meet ti	he applicable st	of filing or more tha atutory filing requ	n 90 days after filin irements, this dat	g.) Pursuant to 605,0207 e will not be listed as
cument's effect	tive date on the Depart	ment of State's	records.			
record spec	cifies a delayed eff	ective date	but not an e	effective time	at 12:01 a m	on the earlier of
The 90th day	y after the record	is filed.	out not un v	meenve ume,	at 12.01 a.iii	. On the earner of
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Page 3 of 3

Filing Fee: \$25.00