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SELECTION -3 P TO 0

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## **COVER LETTER**

Registration Section Division of Corporations

TO:

	NE SERVICES, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	MICHAEL ERIC CHRIST	TANSEN	
		Name of Person	<del></del>
	MASTRIANA & CHRIST	TANSEN PA	
	<del></del>	Firm/Company	
	1500 N FEDERAL HIGH	WAY	1
		Address	
	FORT LAUDERDALE FL	_ 33304	Cation)
		City/State and Zip Code	——————————————————————————————————————
	MIKE@M-C-LAW.COM		
	E-mail address: (	to be used for future annual report notifi	cation)
For further information	concerning this matter, please ca	all:	
MICHAEL ERIC CHRISTIANSEN 954 561- 1711		1: 00:	
Name	of Person		Telephone Number
Enclosed is a check for t	the 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)
Regisi Divisi P.O. E	JING ADDRESS: ration Section on of Corporations Box 6327 assee, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	utions :

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Florida document number £17000204298	Liability Company were filed on 10/0	and assigned
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company her	·e:
The new name must be distinguishable and contain the	words "Limited Liability Company," the de-	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	
Principal office address MUST BE A STRE	ET ADDRESS)	2 <b>55</b>
Enter new mailing address, if applicable:		SSEE SEE
Mailing address MAY BE A POST OFFICE	E BOX)	= 0
		2
B. If amending the registered agent and registered agent and/or the new registered		our records, enter the name of the no
Name of New Registered Agent:	MICHAEL ERIC CHRISTIANSE	×
New Registered Office Address:	1500 N. FEDERAL HIGHWAY	
Total Anguine State Addition.	Enter Florid	la street address
	FORT LAUDERDALE	, Florida 33304
	City	Zip Code

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

TKO DRONE SERVICES, LLC

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>	<u>Address</u>	Type of Action
AMBR	TERESA FITZSIMMONS	1404 E LAS OLAS BLVD #30241	<b>≅</b> Add
		FORT LAUDERDALE FL 33301	□ Remove
			Change
AMBR	KIMBERLY PERO	1404 E LAS OLAS BLVD #30241	
		FORT LAUDERDALE FL 33301	■ Remove
			Change
			Add
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an eff	ve date, if other than the date of filing: (optional) = = = = = = = = = = = = = = = = = = =	
	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list int's effective date on the Department of State's records.	sted as the
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earl 90th day after the record is filed.	ier of:
ated .	OCTOBER 30, 2017	
	MC	
	Signature of a member or authorized representative of a member	
	J	]

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Filing Fee: \$25.00