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(Re	questor's Name)	
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(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

N COOPER APR 04 2019

COVER LETTER

Division of Col					
T4 APPLII SUBJECT:	ED ENGINEERING LLC				
Name of Limited 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:			
	JESSALYN TRAN				
	 	Name of Person			
	T4 APPLIED ENGINEER	ING LLC			
		Firm/Company			
	1313 CRANE CREST WA	·Y			
		Address			
•	ORLANDO, FL 32825				
	City/State and Zip Code				
	-	TECH.COM or TRAN0715@YAI			
		to be used for future annual report noti	fication)		
For further information of	concerning this matter, please ca	all:			
JESSALNY TRAN		321 947 - 6341 at ()			
Name o	of Person	Area Code Daytim	e Telephone Number		
Enclosed is a check for t	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 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

T4 APPLIED ENGINEERING LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on FEBERUARY 14, 2018	and assigned
Florida document number L18000040381		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		TAESE
(Principal office address MUST BE A STREET ADDRESS)		CR A:
		APR APR
		3 88
		EE. F
Enter new mailing address, if applicable:		······································
(Mailing address MAY BE A POST OFFICE BOX)		0R
		0 0
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, 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. 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>	<u>Address</u>	Type of Action
AMBR	DELORES LOWE	207 Williams Rd	
		Winter Springs, FL 32708	Remove
			Change
			
			□ Remove
			☐ Change
			□ Add
			□ Remove
			Change
			□ Remove
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	T4 APPLIED ENGINEERING LLC EFFECTIVE MARCH 26, 2018.		
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	MAR DOWN OCCUPANT		
Effec	tive date, if other than the date of filing: MARCH 26,2018 (optional) ffective 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	404 000	3 7 (2)(
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records.	listed a	is the
he re Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea e 90th day after the record is filed.	rlier o	of:
Dated	1		
	Signature of a member or authorized representative of a member		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00