# 118000123296

(Req	uestor's Name)								
(Add	ress)								
(Add	ress)								
(City	/State/Zip/Phon	e #)							
PICK-UP	☐ WAIT	MAIL							
(Rus	iness Entity Nar	me)							
(503	moss Emily Hai	mo,							
(Document Number)									
Certified Copies	Certificate	s of Status							
Special Instructions to F	iling Officer:								

Office Use Only



600314045556

06/04/18--01015--011 \*\*25.00

J. LEGGETT JUN 0 6 2018



## **COVER LETTER**

Division of Corporation	tions		
SUBJECT: USAIT	EXPERTS -	- LLC ted Liability Company	
The enclosed Articles of Amer	ndment and fee(s) are sub-	nitted for filing.	,
Please return all correspondence	ce concerning this matter	to the following:	·
2	SEOUANÍ SA	Name of Person	
1	SAITEXO	6R+C 110	
<u></u>	17021611	ERTS-LLC Firm/Company	
		GRANDE AVE	
_1	ORLANDO- F	FL - 32809. City/State and Zip Code	<u>_</u>
_	E-mail address: (t	o be used for future annual report notification	ation)
For further information concer	•	·	·
6 60 UANI SA Name of Perso	r Tos	at ( <u><b>30</b> 5</u> ) <u>90 5 8</u> Area Code Daytime T	elephone Number
Enclosed is a check for the foll	owing amount:		
\$25.00 Filling 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

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.)		
The Articles of Organization for this Limited Liability Company Florida document number $\frac{118000}{12329}$		$\underline{\mathcal{L}}$ and as	signed
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 Liabil	-		
Enter new principal offices address, if applicable:	6000 S. RIG 67	RANDI	SAUE
(Principal office address MUST BE A STREET ADDRESS)	280	9	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here			of the new
Name of New Registered Agent:			<u> </u>
Name of New Registered Agent:		<del>:</del>	1
New Registered Office Address:	Enter Florida street address	<u> </u>	<u> </u>
		-4	45 36
	, Florida	Zip Code	<u></u>
New Registered Agent's Signature, if changing Registered Agent:	•	, 	۵

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

Title Name **Address Type of Action** WEBHOLDINUSALLE 6000 S RIO GRANDE AU DANG 07LAN 10 - FC- 32809 KRemove \_\_\_\_ Change CTO - ENTERPRISE MANAGEMENT -WEBHOLDINGU SA-EXPRESS NOTICES GLIENS-LLC Remove 6000 S RÍO GRALPE AU-ORLALPO-FL □ Change \_\_\_\_\_ Remove □ Add ☐ Remove ☐ Change \_\_□ Add \_□ Remove ☐ Change □ Add ☐ Remove ☐ Change

									-							
	<u> </u>									<u> </u>						
														-		
_	<u></u>		<u>-</u>	_												
				· N												
															<u></u>	
															يب	
									•				:		1	
															۱ <u>ان</u> دود	,
														. ' 		5
														<u></u>		50
														=	Ì	-
an effect ote: If	e date, if other tive date is listed, if the date inserted it's effective date	ne date mu Lin this b	ist be specif lock does	fic and o not me	canno eet th	ie appli	icable	ue of fi	iling or i	nore tha	n 90 days a	ptiona fler filir this da	ig.) Purs	uant t	 n 605.0 e liste	020° d as
reco	rd specifies a Oth day after	delaye the red	d effecti cord is fi	ive da iled.	ate,	but n	ot ar	n effe	ctive	time,	at 12:0	1 a.m	. on ti	he e	arlie	r o
ine 9	MAU	<u>_</u>	30		_2	<u>20/.</u>	8.									
	MAY	7	1	7												

Page 3 of 3

Filing Fee: \$25.00