## L18000126429

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





700413055697

07/31/23--01021--012 \*\*25.00





## **COVER LETTER**

TO: Registration Division of	n Section Corporations			
CHIB IEZT.	3D4	Solu TION ?	LLC	
SUBJECT:		Name of Limit	ed Liability Company	
The enclosed Articles	s of Amendment :	ind fee(s) are subm	itted for filing.	
Please return all corre	espondence conce	rning this matter to	the following.	
	1	BEN STI	DART Name of Person	
			Name of Person	
	30	L SoluT	IONS UL	
	<del></del> -	<del>-</del> '	Firm Company	
	4	13 Herri	Address	
			Address	· · · · · · · · · · · · · · · · · · ·
	_	Tallahasa	u . F.	22.30 <b>3</b>
		(4((((()	City State and Zip Code	<u></u>
			ru 10e Gm	
		E-mail address: (to	be used for future annual	report notification)
For further informatic	in concerning this	s matter, please cal	l:	
	Fileen	Stuart	ክ50 \	339-5223
Nan	ne of Person		Area Code	339-5223  Daytime Telephone Number
Enclosed is a check to	or the following a	пюшit:		
14 \$25.00 Filing Fee		Filing Fee & scate of Status	□ \$55,00 Filing Fee Certified Copy (additional copy is en	Certificate of Status &
Mailing Add			Street A	
Registration Division o	on Section of Corporations	<b>;</b>		ation Section on of Corporations
P.O. Box (	5327		The Ce	ntre of Tallahassee
Tallahasse	e, FL 32314		2415 N	. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3DC Solutions	LLC	
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appear ited Liability Company)	s on our records.)
The Articles of Organization for this Limited Liability Comp Florida document number <u>L 18000126429</u> .	any were filed on	5   21   18 and assigned
This amendment is submitted to amend the following.		
A. If amending name, enter the new name of the limited	liability company he	<u>re</u> :
The new name must be distinguishable and contain the words "Limited I	iability Company," the d	rsignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable: ( <u>Mailing address MAY BE A POST OFFICE BOX)</u> B. If amending the registered agent and/or registered offi	ice address on our re	SECORE JANY OF THE SECOND STATE OF THE SECOND
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flor	ida street address
	City	, Florida Zip Code
	$\epsilon \dot{m}$	zip v oav

## 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 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
MGR	Eileen Stuart	413 Meridian PL	<b>∑</b> ∕/\dd
		TallahasseE FL 32303	□Remove
			□ Change
			□Add
			□Remove
			□Change
			DAdd
		<del></del>	□Remove
			□Change
	<u></u>		DAdd
			□Remove
			□ Change
	<del></del>		□Add
			□Remove
			□Change
			□Add
			□Remove
			□( thun, a

ゴ	<u></u>	(136	<u> </u>	SΤ	VAY	τ)		m	7	~e	وي	Jul	<u>^</u>	AV	(D	0	nly	[	
em	به۱	oye	e	cf	l 	31	06	50	lut	. 4 بره.	٠ اــ	<u>LC</u>	•			١٥٠	<u>له ار</u>	Цķ	ie_
t	D	a	H	`	м	{}	$\omega_{11}$	FE		⊊il.	en	. 5	fu	an t	-	a	_ ک	An	<u>-</u>
	્રે હ્યુ	UAL	<u></u>	٥٠	n-e	<u></u>	<u> </u>	np	j.	1An.	<u>49e</u>	K_	U	Ŧ.	7	-سو	<u>-</u>	An	<u> </u>
												<u> </u>							·········
																_			
										_		-						<del>_</del>	
																	ALLA	SECH	<u> </u>
										· <del></del>			•	-			HASSE	رد الماري الماري	<del>-</del>
																	ندان بدربر تا	44	- <u>r</u>
		-														) 	5.7.	7:47	
If the	date i date	s listed insert	, the d ed in	ate mu this b	ist be sp lock d	ecitic oes no	and car st mee	mot be	pplica	o date ble str	of tiling	2 01 m	re th	an 90 a tirem	lays a	itter f	iling.)	Pursuan vill not	t to 605 be liste
d spec led.	tfies	a dela	iyed e	ffecti	ve date	. but	net an	elfecti	ive tir	ne, at	12:01	a,m, c	n the	earli	er of	: (h)	The	90th di	ay after
بر <u>د</u>	Ju	ا س	13	3		<del></del>	· _	20	23						٠.				
										_									

1331 D 055 07

BEN STUART
Typed or printed name of signee