118000128417

Office Use Only



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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: GEOTEC	CK, LLC		
		ited Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Melissa Dursi, Esquir		
		Name of Person	
	Marshall Socarras Gra	int, P.L	
		Firm/Company	
	197 South Federal His	abway Suite 200	
	177 South Federal Fing	Address	
	Boca Raton, FL 33432	City/State and Zip Code	
	efile@msglaw.com	•	
	E-mail address: (to be used for future annual report notifi	cation)
For further information co	oncerning this matter, please ca	dl:	
Melissa Dursi, Esqu		at (<u>561</u>) <u>361-1000</u> Area Code Daytime	Telephone Number
		·	·
Enclosed is a check for th	ne 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)
MAILI	NC ANNBESS.	STDUET/COUDIE	TD ANNDERS.

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

GEOTEC	K, LLC				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) hability Company)				
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000128417</u> .	were filed on5/22/2018	and assigned			
Florida document number 1576000120417					
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	ity Company," the designation "LLC" or the	he abbreviation "L.L.C."			
Enter new principal offices address, if applicable:		6 Vision			
(Principal office address MUST BE A STREET ADDRESS)		CRETATION OF			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		CORPORATIONS OF THE PHIZ: 54			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ter the name of the new			
Name of New Registered Agent:					
New Registered Office Address:	Enter Florida street address				
	Emer Pioriaa street agaress				
	Florida				
	Chy	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>	Address	Type of Action
MGR	AUSTIN A DEHGHANI (Correction to spelling of name)	5304 SANCERRE CIR	
	(Correction to Spering or name)	LAKE WORTH, FL 33463	Remove
			⊠ Change
			Add
			☐ Remove
			Change
		·	
			□ Remove
			Change
			Add
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			Add
			Remove
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			Change

Mective date, if other than the date of filing:	
an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing tote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date occument's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m.	
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	e will not be its
The 90th day after the record is filed.	, on the earl
ated May 25	
Signature of a member or authorized representative of a member	
Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00