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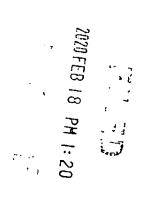


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COVER LETTER

TO:

	Registration Sec Division of Corp			
SURJEC	TT: SYSTEM S	UPPORT SPECIALIST CONSU	JLTING, LLC	
JOBOLO	<u></u>	Name of Limi	ted Liability Company	•
The encl	osed Articles of A	Amendment and fee(s) are subt	nitted for filing.	
		ndence concerning this matter t		
		R	UDDY A. RODRIGUEZ	
		_	Name of Person	
			Firm/Company	
		2610	MARINA BAY DR. E. APT. 308	
			Address	
		<u>F</u>	T. LAUDERDALE, FL 33312 City/State and Zip Code	
		SSS(CONSULTING305@GMAIL.CO to be used for future annual report	M
For furth	ner information co	oncerning this matter, please ca		,
	RUDDY RO	DDRIGUEZ	at (<u>305</u>)	490-4853
	Name of	f Person	Area Code Da	ytime Telephone Number
Enclose	d 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)
	Mailing Addres		Street Addres	
Registration Section Division of Corporations		Registration Division of	Corporations	
	P.O. Box 632		The Centre	of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SYSTEM SUPPORT SPEC	IALIST CONSULTING L	LC	<u>-</u>
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears ited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Comp	oany were filed on	06/18/2018	and assigned
lorida document number <u>L18000149082</u> .			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company her	<u>re</u> :	
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 applicable:			202)
Principal office address MUST BE A STREET ADDRES.	<u> </u>		
Enter new mailing address, if applicable:			PH
Mailing address MAY BE A POST OFFICE BOX)			20
3. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:			me of the new register
	Enter Flori	ida 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
MGR	RUDDY A. RODRIGUEZ	2610 MARINA BAY DR E	
		APT. 308	□Remove
		FT. LAUDERDALE, FL 33312	≝ Change
			□∧dd
			□Remove
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Decades Juda if other than	the date of filings		(optiona	n
. Effective date, if other thar (If an effective date is listed, the dat Note: If the date inserted in the document's effective date on the second date on the second date of the second	e must be specific and cannot his block does not meet the	be prior to date of filing of applicable statutory f	or more than 90 days after filir	rg.) Pursuant to 605.0207 (3)(
the record specifies a delayed efficord is filed.	fective date, but not an effe	ective time, at 12:01 a.	m. on the earlier of: (b)	The 90th day after the
Dated JANUARY 13	202			
	D	·		
	Signature of a member	or authorized representa	tive of a member	
RUDDY RODRIG	GUEZ			

Typed or printed name of signee