

L18000 163 444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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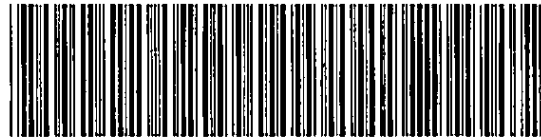
(Business Entity Name)

(Document Number)

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03/06/19--01014--022 **30.00

R. WHITE
MAR 13 2019

FILED
2019 MAR -6 PM 4:20
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Innovative Technology Solutions 3, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher Toner

Name of Person

Innovative Technology Services

Firm/Company

150 East Palmetto Park Road, Suite 800

Address

Boca Raton, FL 33432

City/State and Zip Code

ctoner@itsolutions3.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher Toner

954

621-6226

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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**

FILED

2019 MAR -6 PM 4:20

Innovative Technology Solutions 3, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 7/30/18 and assigned
Florida document number L18000163444.

This amendment is submitted to amend the following:

A. If amending name enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address if applicable:

Christopher Toner

(Principal office address MUST BE A STREET ADDRESS)

150 East Palmetto Park Rd. STE 800

Boca Raton, FL 33432

Enter new mailing address if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Christopher Toner

New Registered Office Address:

150 East Palmetto Park Rd. STE 800

Enter Florida street address

Boca Raton

Florida 33432

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>	<u>Type of Action</u>
P	Aliya Budhwani	5470 NW 38 Ter Coconut Creek, FL 33073	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
CEO	Christopher J. Toner	150 East Palmetto Park Road, #800 Boca Raton, FL 33432	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
P	Najeeb W. Khan	150 East Palmetto Park Road, #800 Boca Raton, FL 33432	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

02/28/19

F. Effective date if other than the date of filing: _____ (optional)

(If 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.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

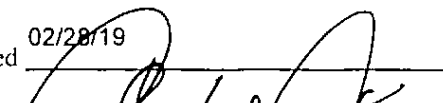
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 02/28/19

02/28/19

cd



Signature of a

Christopher J. Toner

Signature of a member or authorized representative of a member

Christopher J. Toner

Typed or printed name of signee