

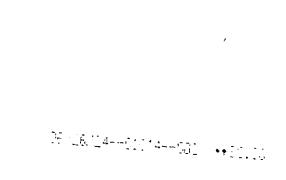
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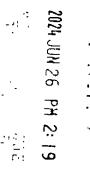
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PICK-UP	₩ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copi es	_ Certificates	of Status
Special Instructions to	Filing Officer:	
2 Letters		

Office Use Only



300432059443





COVER LETTER

TO:

Registration Section

Division of Cor	porations		
	ADSIDE ASSISTANCE LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	BOOTROS BELANCE		
		Name of Person	
	 	Firm/Company	
	742 NE 131st ST		
		Address	
	NORTH MIAMI, FL 3316	i	_
	BBELANCE28@GMAIL.C		
For further information o	E-mail address: (oncerning this matter, please c	to be used for future annual report not	offication)
	oncerning this matter, prease e		
BOOTROS BELANCE		305 928-0072 at ()	
Name o	f Person	at () Area Code Daytir	ne 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 radditional copy is enclosed)
Mailing Addres Registration S		<u>Street Address:</u> Registration So	ection
Division of Corporations		Division of Corporations	
P.O. Box 632		The Centre of	
Tallahassee, FL 32314		2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Compa (A Florida Limited	iny as it now appears on our reco Liability Company)	ords.)
The Articles of Organization for this Limited I Florida document number 1.18000230768	Liability Company	were filed on 09/24/2018	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liah	ility company here:	
POTRA TECHNOLOGIES LLC			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	13100 West Dixie Highway.	, North Miami, FL 33161
Principal office address MUST BE A STRE	ET_ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		742 NE 131st ST, North Miami, FL 33161	
B. If amending the registered agent and/or agent and/or the new registered office address.		address on our records, <u>ent</u>	er the name of the new regis
Name of New Registered Agent:			70
New Registered Office Address:	N/A	F Pl. 17	024 11
		Enter Florida street add	Florida 5
		City	Zin 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 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	BOOTROS BELANCE	742 NE 131st ST, NORTH MIAMI, FL 33161	≣ Add
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Effective date, if other than the date of filing: 99/24/2018 (optional) If an effective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0267 Note: If the date inserted in this block does not meet the opplicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. If 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 rid is filed.	N/A	
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Dated	Dated	
Signature of a member or authorized representative of a member		Signature of a member or authorized representative of a member
BOOTROS BELANCE Typed or printed name of signee		

Filing Fee: \$25.00