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C. GOLDEN FEB - 9 2019

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Micro Tech Data Support 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:
Jake Foster Name of Person
Microtech Data Support
127A N Federal Highway
Lake Worth FC 33460 City/State and Zip Code
1: gail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (800) 574 3879 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Status Solution Sta

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

The Articles of Organization for this Limited Liability Company were filed on and assigned Florida document number _U8000 265718 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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: New Registered Office Address: Enter Horiau Succession 33460
City Florida 33460
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 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>	Name	Address	Type of Action	
MAR	Jake Foster	127A N Federal Hwy	XAdd	
		lake worth, Fl 38460)_□ Remove	
			Change	
MC-1R Jahr Foster	Jake Foster	129 N Federal Hwy		
		Suto 200	Remove	
		Lake Worth, Fl 33460	Change	
			🗆 Add	
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•	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an e Note	effective date, if other than the date of filing:
the report	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Date	January 26+h . 2019
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00