118000288121

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COVER LETTER

Division of Cor	porations				
C1 = 1 = 1	chnologies, LLC.				
SUBJECT:	Name of Lim				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Mark R. Blackburn				
		Name of Person		-	
	T-VEC Technologies, LLC	g.			
		-			
	4770 Glenn Pine Lane				
		Address		20	
·	Boynton Beach, FL 33436			2019 FEB 25 SECRETARY LALLAHUSS	APPI FP
	blackburn@t-vec.com	City/State and Zip Code		ANY O	产全合
	E-mail address: (to be used for future annual report notif	fication)		,
For further information c	oncerning this matter, please c	all:		SEEL FLORID	
Mark R. Blackburn		703 431-4463		• ••	
Name o	f Person		e Telephone Number	r	
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &	

MAILING ADDRESS:

TO:

Registration Section

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**

(Name of the Lim	ited Liability Company as it now app (A Florida Limited Liability Company	ears on our records.)
	(A Florida Limited Liability Company	(1)
The Articles of Organization for this Limited I	Liability Company were filed on	December 14, 2018 and assigned
Florida document number L18000288121	,	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, <u>enter the new name</u>	of the limited liability company	<u>here</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," th	e designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	2019 AL
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE		FILED FILED FILED RETARY OF STATE AHASSEC, FLORID.
B. If amending the registered agent and registered agent and/or the new registered of	• •	on our records, enter the name of the no
Name of New Registered Agent:	Mark R. Blackburn	
New Registered Office Address:	4770 Glenn Pine Lane	
	Enter I	Florida street address
	Boynton Beach	, Florida 33436
	City	Zip Code

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
AMBR	Robert D. Busser	4368 Borland St West Bloomfield, MI 48323	= Add
			□ Remove
			☐ Change
			□ Remove
			☐ Change
		_	□ Add
			Remove 3E CRB I
			APPROVED APPROVED AND Change AND SECRETARY OF STATE I ALLAHASSEE, FLORIE
			Change
			Add
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			☐ Change

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		<u>. </u>			Jank Ladi Ling	Ft1 -
ffective date, if other than the an effective date is listed, the date mu ote: If the date inserted in this becoment's effective date on the E	st be specific and can lock does not meet	the applicab		or more than 90 day		
e record specifies a delaye The 90th day after the rec		e, but not	an effectiv	e time, at 12	:01 a.m. on	the earlier
rited	<u></u> .	2019	_ •			
Mal	Signature of a men	iber or authori	zed representa	tive of a member	· · · · · · · · · · · · · · · · · · ·	

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Filing Fee: \$25.00