## L19000011285

Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporations	
Queen Marie Holdings 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:	
Raymond Friedman	
Name of Person	
United America Technologies, LLC	
Firm/Company	
10213 Wilsky Bkvd.	
Address	
Tampa, FI, 33625	
City/State and Zip Code	
ray@mile2.com	
E-mail address: (to be used for future annual report notification)	200
For further information concerning this matter, please call:	2024 NOV
Raymond Friedman 813 892-6465 at ( )	1 00
Name of Person Area Code Daytime Telephone Number	THE C
	1: 26 가게데
✓ \$25,00 Filing Fee	of Status &
Mailing Address:  Registration Section  Registration Section	
Division of Corporations P.O. Box 6327  Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Queen Marie Holding LLC		
( <u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our reco Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Co Florida document number $\frac{L19000011285}{L19000011285}$	ompany were filed on 01/09/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
TechSherpas LLC		
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	<u></u>	
		<u>-</u>
Enter new mailing address, if applicable:		2024 NOV
(Mailing address MAY BE A POST OFFICE BOX)		CO
		三言り
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our records, <u>ent</u>	er the name of the new register
		141
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	ress
		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 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
			□Remove
		□Change	
		□Add	
		□Remove	
		□Change	
			□Add
			□Remove
			□Change
	<del></del>	□Add	
		□Remove	
		□Change	
<del></del>			□Add
			□Remove
			Change
			□Add
			Remove
			□Change

(If an ei <u>Note:</u>	tive date, if other than the date of filing:  [Tective 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)  [If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
ecord is f	$\sim$ $\wedge$ $ $ $ $
Dated	11/04/2024

Typed or printed name of signee