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SECTION OF THE

## **COVER LETTER** 3

ro:	Registration Se Division of Cor			
		NOLOGY, LLC		
SUBJE	CT:		ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		MAX FARAHANI		
		-	Name of Person	
			Firm/Company	
			Address	
		3291-3297 E Oakland Park	k Blvd	
		Fort Lauderdale, Florida 33	City/State and Zip Code 308	
		E-mail address: (	Name of Limited Liability Company  and fee(s) are submitted for tiling.  Ining this matter to the following:  RAHANI  Name of Person  Firm/Company  Address  F. Oakland Park Blvd  City/State and Zip Code  date. Florida 33308  E-mail address: (to be used for future annual report notification)  matter, please call:  at (	
For furt	her information co	oncerning this matter, please ea	all:	
Max Fa				
	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	ne following amount:		
<b>■ \$2</b> 5	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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

FILED

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

The Articles of Organization for this Limited Liability Company	were filed on 02/25/2010@CTAPY UI 27 11 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	endment is submitted to amend the following:  nending name, enter the new name of the limited liability company here:  name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."  ew principal offices address, if applicable:  and office address MUST BE A STREET ADDRESS)  ew mailing address, if applicable:  a address MAY BE A POST OFFICE BOX)  amending the registered agent and/or registered office address on our records, enter the name of the new
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter now principal offices address if applicables	3291-3297 E Oakland Park Blvd
(Principal office address MUST BE A STREET ADDRESS)	Fort Lauderdale, Florida 33308
Enter new mailing address, if applicable:	3291-3297 E Oakland Park Blyd
(Mailing address MAY BE A POST OFFICE BOX)	Fort Lauderdale, Florida 33308
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	Far w Florida atreat address
	Emer Frontal Siver address
	, Florida
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>	Type of Action
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e record specifies a del The 90th day after the		e, but not an	effective time, a	t 12:01 a.m. on	the earlier of
June 24	2	019			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00