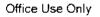
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(Re	equestor's Ñame)	
(Ad	ldress)	<u> </u>
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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SCHOOL STANDA

COVER LETTER

то:				
crini		TURE BIOTECHNOLOGICA	L SOLUTIONS, LLC	
SOB	EC1:	Name of Lim	ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
	Name of Person Area Code Daytime Telephone Number ed is a check for the following amount:			
			Name of Person	
		NATURE BIOTECHNOL	OGICAL SOLUTIONS, LLC	
			Firm/Company	
		8362 PINE	S BWJ # 45	.3
			•	
		E-mail address: (to be used for future annual report notific	cation)
For fu	rther information c	oncerning this matter, please ca	all:	
EDNA MARCELA ZAMBRANO		MBRANO		
	Name o	f Person		Telephone Number
Enclos	sed is a check for th	ne following amount:		
≅ \$2	5.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

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 OF

	TECHNOLOGICAL SOLUTIONS, L		
(<u>Name of the Limi</u>	ted Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited L Florida document number <u>L19000114526</u>		26/2019	and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	f the limited liability company he	<u>re</u> :	
The new name must be distinguishable and contain the v	words "Limited Liability Company." the de	rsignation "LEC" or the abbrev	ation "Lal., C."
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	<u> </u>		
			2 = = = = = = = = = = = = = = = = = = =
Enter new mailing address, if applicable:			= 3 9
(Mailing address MAY BE A POST OFFICE	<u></u>		
B. If amending the registered agent and registered agent and/or the new registered o	Mice address here: EDNA MARCELA	A ZAMBRANO	name of the ne
New Registered Office Address:	200 SE 6TH STREET		
		ida street address	
	FORT LAUDERDALE	Florida 33301	ip Code
	City	/.	ір Соағ

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

Page 1 of 3

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	EDNA ZAMBRANO	200 SE 6TH STREET. STE 304 FORT LAUDERDALE FL 33301	■ Add
			□ Parrow
			Change
			☐ Remove
			Change
			Add
			□ Remove
			Change
			Add
			Remove
			Change
			Add
			Remove
			☐ Change
			Add
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	-		*·		
Effective date, if other than fran effective date is listed, the date	the date of filing: - -\footnote{\chi_1}	ord 16, C	(Cormon than 90 days	optional) after filing A Pursuant to 605	. 0207
Note: If the date inserted in thi	s block does not meet the	applicable statutory	filing requirements.	this date will not be listed.	ed as
document's effective date on the	e Department of State's re	cords.			
ne record specifies a dela		ut not an effecti	ve time, at 12:0)1 a.m. on the earli	er of
The 90th day after the i	ecora is mea.			در	
	2019	, , , ,			
JULY 16		/ · /		م م را استنتاب مراج عداد در الم	
JULY 16 Dated			10.11 1 11		
JULY 16 Dated		-11/1	Mari To		
Dated	Signature of a member of	r authorized represent	tative of a member		
JULY 16 Dated	Signature of a member of	or authorized represent	tative of a member		

Page 3 of 3

Filing Fee: \$25.00