L19000145579

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
<u></u>		

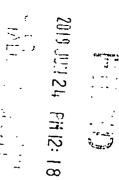




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06/24/19--01023--015 **25.00

R WHITE



COVER LETTER

SUBJECTMICHAFI	A. BROWN INSTRUMENT	AND CONTROLS TTC	
aoist.Cronomica	Name of Lim	ited Liability Company	<u> </u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	SHARON O. FORREST	ER	
		Name of Person	
	MICHAEL A. BRO	WN INSTRUMENT AND CON	NTROLS
		Firm/Company	
	_1906 LAKE ARIANA		<u></u>
		Address	
	AUBURNDALE, FL 3		
		City/State and Zip Code	
	MICHAELB@UNI	VERSALCONTROLS.NET to be used for future annual report noti	
	E-mail address: (to be used for future annual report noti	fication)
For further information c	concerning this matter, please ca	all:	
	RON O. FORRESTER	at (<u>863</u>) <u>965-2053</u>	
Name (of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
□x.\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

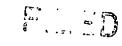
Registration Section Division of Corporations

TO:

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



2019 JUN 24 PH 12: 18

(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 5/31/2019 and assigned Florida document number L19000145579 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 "L.L.C." 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 Florida street address City

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
AMBR	MICHAEL A. BROWN	1906 LAKE ARIANA BLVD AUBURNDALE FL 33823	Add x
			☐ Remove
			Change
			☐ Remove
			□ Change
			□ Remove
			Change
			Add
			Remove
			Change
			Remove
			Change
			Add
			Remove
			☐ Change

E. Effective date, if other than the date of filing: (If an effective date is itself, 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 Note: [The date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: b) The 90th day after the record is filed. Dated June 19 2019 Signature of a furnities of authorized representative of a furnities. SHARON O. FORRESTER		· · · · · · · · · · · · · · · · · · ·
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Signature of a member or authorized representative of a member		
	Dated	Jan Eleman

Page 3 of 3

Filing Fee: \$25.00