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| (Requestor's Name) |
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| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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| | 2/12/20 |
| | To Whom: |
| | I MADE A SLIGHT MISTAKE/KEYSTROKE |
| | ON MY LLC PAPER WORK. |
| | 12303 SHOULD HAVE BEEN 12302 THORNHILL. |
| | GARRY O'Neil Ja ON COM GUONEIL J ISO 1ST. COM 704 280 0470 Cell |
| | NORCROSS GA 30093 |
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COVER LETTER

TO:

| TO: Registration Se Division of Cor | | | |
|--|--|--|--|
| GOAL Tee | | | |
| SUBJECT: | Name of Lim | ited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | Garry ONeil | | |
| | _ | Name of Person | |
| | Goal Technology II | | |
| | | Firm/Company | |
| | 5300 Oakbrook Pkwy 370 | | |
| | | Address | |
| | Norcross ga 30093 | | |
| | | City/State and Zip Code | |
| | gvoneil@iso1st.com | | |
| | | to be used for future annual report not | ification) |
| For further information c | oncerning this matter, please c | all: | |
| Garry ONeil | | 704 280 0470 at () | |
| Name o | f Person | | ne Telephone Number |
| Enclosed is a check for the | ne following amount: | | |
| ■ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Addres Registration S | | Street Address: Registration Se | ection |
| Division of C | | Division of Co | |
| P.O. Box 632 | | The Centre of | |
| Tallahassee, I | FL 32314 | 2415 N. Monro | oe Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| GOAL Technology Ilc | | AND 图 |
|--|--|---|
| (Name of the Limited Liability Compa (A Florida Limited | nny as it now appears on our records.) Liability Company) | S S C C C C C C C C C C C C C C C C C C |
| The Articles of Organization for this Limited Liability Company Florida document number <u>L20000032263</u> | were filed on Febuary 05, 2020 | Tests and ssigned |
| This amendment is submitted to amend the following: | | |
| (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 Febuary 05, 2020 L20000032263 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 "LLC." Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: Solution of the Limited Liability Company here: 12302 Thornbill Ct Bradenton, FL 34202 Enter new mailing address, if applicable: Solution of the new registered office address on our records, enter the name of the new registered office address on our records, enter the name of the new registered office address on our records, enter the name of the new registered office address on our records, enter the name of the new registered office address on our records, enter the name of the new registered of the new register | | |
| The new name must be distinguishable and contain the words "Limited Liabi | lity Company," the designation "LLC" or | the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 12302 Thornhill Ct | |
| (Principal office address MUST BE A STREET ADDRESS) | Bradenton, FL 34202 | |
| | | |
| Enter new mailing address, if applicable: | 5300 Oakbrook pkwy # 370 | |
| (Mailing address MAY BE A POST OFFICE BOX) | Norcross, GA 30093 | |
| | | |
| B. If amending the registered agent and/or registered office agent and/or the new registered office address here: | address on our records, <u>enter the</u> | name of the new register |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida creat address | |
| | | 1. |
| | , Florid | 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 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 addeor removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | Name | Address | Type of Action |
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| ffecti ^r | re date, if other than the date of filing: |
| ote: | f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as |
| | nt's effective date on the Department of State's records. |
| | |
| | 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 |
| l is file | rd. |
| , | . 1 |
| ated | February 11, 2020 |
| | |
| | / / / / / / / |
| | Signature of a member or authorized representative of a member |

E. 00 E.00

Typed or printed name of signee