From: Kimberly Laughrey

Division of Corporations

12/22/2020

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000436335 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 : (614)280-3338 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:__

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RPC TECH, LLC

Certificate of Status	0
Certified Copy	
Page Count	04
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

Help

DEC 0.0 2020

D CUSHING

ARTICLES OF AMENDMENT TQ ARTICLES OF ORGANIZATION OF

	PC Tech, LLC	•	
•	=	ears an our records.)	
(Name of the Limited Liability (A Florida I	imited Liability Company	y)	
The Articles of Organization for this Limited Liability Co	mpany were filed on	February 17, 2020	and assigned
Florida document number L20000047189			
This amendment is submitted to amend the following:		•	
A. If amending name, enter the new name of the limit	ed liability company	here:	
Flamingo Tech Solutions, LLC		. .	•
The new name must be distinguishable and contain the words "Limit	ed Liability Company," th	e designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	· ·	· · · · · · · · · · · · · · · · · · ·	
(Principal office address MUST BE A STREET ADDRI	<u> </u>	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
		·	20
	1		330
Enter new mailing address, if applicable:	·		
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
		· · · · · · · · · · · · · · · · · · ·	10
			90
B. If amending the registered agent and/or registered agent and/or the new registered office address.		on our records, en	ter the name of the ne
•	•		
Name of New Registered Agent:		entantic que des cary cary a férical de la cary de la c	
New Registered Office Address:			<u> </u>
• • • • • • • • • • • • • • • • • • •	Enter l	Florida street address	
		, 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 Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

Page: 4 of 5

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = Authorized Member					
Title	<u>Name</u>	Address	Type of Action		
	· · ·				
			D Add		
•		•	□ Remove		
	•		LI Remove		
			Change		
			•		
- 			Add		
		<u> </u>	Remove		
	·		Change		
٠					
			DAdd		
	·		•		
			C Remove		
			Change		
			i Crimige		
	· · · · · ·		Add		
			☐ Remove		
	·	·	5		
			Change		
			 .		
			Rcmove		
			☐ Change		
	·		□ Remove		
			Change		

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	December	14	2020			
Dated		122:	· · · · · · · · · · · · · · · · · · ·			
	Signature of a member or authorized representative of a member					
	Robert Bernier					
	Typed or printed name of signee					

Page 3 of 3

Filing Fee: \$25.00