L20000144551

(Re	equestor's Name)	
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PICK-UP	WAIT	MAJL MAJL
(Bu	isiness Entity Name)	
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Certified Copies	Certificates o	of Status
		
Special Instructions to Filin	ng Officer:	
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Office Use Only



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TO:

	Registration Se Division of Cor				
SUD IF C	TECHNO	DLOGIC SYSTEMS LLO	С		
SUBJEC	1:	Name of Lim	ited Liability Company	-	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please ret	turn all correspo	ndence concerning this matter	to the following:		
		William Lynn Whitte	nberger		
			Name of Person		
			Firm/Company		
		6811 Hugh Dr			
			Address		
		Callaway, FL 32404			
		_	City/State and Zip Code		
		bill@technologic.cam			
For furthe	er information co	E-mail address: (oncerning this matter, please ca	to be used for future annual repail:	port notification)	
Michell	le K. Suarez	:		-4119	
•	Name o	f Person	Area Code	Daytime Telephone Number	
Enclosed	is a check for th	ne following amount:			
\Sigma \$25.6	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclos	\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Addres Registration S		Street Add Registrati	ress: on Section	
Ì	Division of C	orporations		Division of Corporations	
	P.O. Box 632 Tallahassee, I			re of Tallahassee Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TECHNOLOGIC SYSTEM	IS LLC	
(Name of the Lim	ted Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited L	iability Company were filed on 05/27/2020	and assigned
Florida document number <u>L20000144551</u>		
This amendment is submitted to amend the following	owing:	
A. If amending name, enter the new name o	f the limited liability company here:	
The new name must be distinguishable and contain the v	vords "Limited Liability Company," the designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	<u> </u>
		<u> </u>
Enter new mailing address, if applicable:		, <u> </u>
Mailing address MAY BE A POST OFFICE	BOX)	
B. If amending the registered agent and/or agent and/or the new registered office addr	registered office address on our records, <u>enter the ress here</u> :	name of the new register
Name of New Registered Agent:	William Lynn Whittenberger	
New Registered Office Address:		
- 	Enter Florida street address	
	Florid:	a
	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.

William Whittenberger

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
COO/	JOSHUA L. MILLER	111 NORTH ORANGE AVE	© Add
CEO		ORLANDO, FL 32801	⊠ Remove
			Change
MGR	William Lynn Whittenberge	6811 Hugh Dr	⊡ Add
		Callaway, FL 32404	=Remove
		· · · · · · · · · · · · · · · · · · ·	EX Change
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ective date, if other than the	date of filing:		(optional)	
effective date is listed, the date mus e: If the date inserted in this blo ument's effective date on the De	the specific and cannot be prior to ock does not meet the applica		n 90 days after filing.) Pursuunt te	
cord specifies a delayed effectiv s filed.	e date, but not an effective tin	ne, at 12:01 a.m. on the	earlier of: (b) The 90th day a	after the
March 13	2024	_ ·		
William Whitter	berger			
	Signature of a member or author	ized representative of a m	ember	-
	•			

Filing Fee: \$25.00