121000194375

(Re	equestor's Name)	<u> </u>
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Dc	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

	egistration Se ivision of Cor			
The enclo Diago rate For furthe Ayub Kha	Change the	name from "Direct Tech Solut	ions, LLC" to "Design Tech Globa	ıl, LLC"
	·	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub		
		Ayub F. Khan		
			Name of Person	
		Direct Tech Solutions, LLG	3	
			Firm/Company	
		16308 Bristol Lake Cir		
			Address	
		Orlando, FL 32828		
			City/State and Zip Code	···
		реп.н.кпап@gman.com	to be used for future annual report not	(Festion)
For further	information c	oncerning this matter, please c	•	incation
Ayub Kha	n		410 963 6104 at ()	
	Name of	f Person	Area Code Daytin	ne Telephone Number
isiiciosed i	s а спеск юг и	е юкожију апоши:		
\$25.06	Filing Fee	\$30.00 Filing Fee & Contificate of Status	S55.00 Filing Fee &	□ \$60.00 Filing Fee.
			(additional copy is enclosed)	Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section
Division of Comprations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee FL 32303

ATTICLES OF AMENDMENT TO

OF

FILED

Direct Tech Solutions, LLC			2022 JUN 17 PM 1:21
		ny as it now appears on our rec liability Company)	TALLAHASSEE, EL
The Articles of Organization for this Limited Lia	ability Company	were filed on	and assigned
Florida document number L21000194375	····································		
This amendment is submitted to amend the folio	wing:		
A. If amending name, enter the new name of	the limited liabi	lity company here:	
Design Tech Global Solutions, LLC			
The new name must be distinguishable and contain the we	ords "Limited Liabili	ty Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: same address as before			
(Principal office address MUST BE A STREE	(ADDRESS)		
Enter now mailing address if annlicable (Mailing address MAY BE A POST OFFICE)	<u>30X)</u>	same address as before	
B. If amending the registered agent and/or reagent and/or the new registered office address Name of New Registered Agent: New Registered Office Address:		efore	ter the name of the new registere
THE STATE OF THE PERSON OF THE STATE OF THE		Enter Florida street ad	
	orlando		, Florida 32828
		City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I nereby 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.

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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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□11 - m - m - m
			□Change
			□Remove
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nativa data if ather than th	o date of filing: 6/14/2022	(ontional)	
effective date is listed, the date m	ust be specific and cannot be prior to date of filing	g or more than 90 days after filing.) Pursuant to 605.0)20
te: If the date inserted in this to the later on the late		rilling requirements, this date will not be listed	1 41
cord specifies a delayed effecti	ve date, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th day after	the
13th of June	2022		
~!yuo ^	Signature of a member or authorized represen		