K21000221004

(Reque	stor's Name)	
(Addres	ss)	
(Addres		
(Audies	,,,	
(City/St	ate/Zip/Phone #))
PICK-UP	WAIT	MAIL
(Busine	ss Entity Name)	
(Docum	nent Number)	
(2004	tone realizery	
0.17.10.1	0 111 1	
Certified Copies	Certificates of	Status
Special Instructions to Filir	g Officer:	

Office Use Only



200392684362

08/18/22--01006--017 **25.00

SECRETARY OF STATE

COVER LETTER

Registration Section

Division of Corporations

Tallahassee, FL 32314

TO:

СЛТ	ECHNOLOGIES, LLC			4.5				
SUBJECT:	Name of I	Limited Liability Company						
The enclosed Articl	les of Amendment and fee(s) are s	submitted for filing.						
Please return all cor	rrespondence concerning this mat	ter to the following:						
	JODI RONEN							
		Name of Person						
	JG CONSULTING SEI	RVICES, LLC						
		Firm/Company						
	5481 WILES RD STE :	502						
		Address						
	COCONUT CREEK, F	1. 33073	Ā	2022 A SECR	day.			
	JODI@ACCU-TAX.TA	City/State and Zip Code	2	2022 AUG 18 SECRETARY				
	-	s: (to be used for future annual report notifi	ication)	-	ŢŢ			
For further informa	tion concerning this matter, pleas	e call:	 ເມ	PM 1: 3	C			
JODI RONEN		954 449-9709 at ()	لنم	31 작전				
N	ame of Person		Telephone Number					
Enclosed is a check	for the following amount:							
■ \$25.00 Filing F	Tee □ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	Certified Cor	ficate of Status &				
•	tion Section	<u>Street Address:</u> Registration Sec						
	of Corporations	Division of Corp						
P.O. Box	: 6327	The Centre of Ta	allahassee					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited L.	ability Company as it now appears on our recor orida Limited Liability Company)	<u>(ds.</u>)
The Articles of Organization for this Limited Liabil: Florida document number L21000221004		
This amendment is submitted to amend the following	g:	
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 "LLO	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	;	
(Principal office address MUST BE A STREET A	DDRESS)	S 787
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	2	AUG 18 PH 1: CORETARY OF STALLLAHAS SEE
B. If amending the registered agent and/or regist agent and/or the new registered office address he	tered office address on our records, <u>enter</u> re:	r the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	WS
-	City:	lorida 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 added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JUSTIN SILVERSTEIN	19800 W DIXIE HWY	□Add
		AVENTURA, FL 33180	Remove
			□Change
MGR	JOSEPH PESTANA	5481 WILES RD STE 502	
		COCONUT CREEK, FL 33073	≣Remove
			S SChange
MGRM	ON TASK TECHNOLOGY, LLC	1309 COFFEEN AVE STE 5705	SECRETAL ALL ALL
		SHERIDAN WY 82801	ARY OF S
			Control of the contr
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

	_		 ,				 .	<u> </u>			
						,			<u> </u>		
		<u> </u>			<u>_</u>						•
	<u> </u>		<u></u>						-		
		-									•
	_								 		
								_	75E	7022	
			<u></u>						ARET	AUG UG	
									ARY OF	- 8-	
				 ;					33.55	뫈	, mar
	.		•						<u> </u>	_ <u></u> _	
											
									.		•
										<u> </u>	
				<u> </u>						<u>.</u>	
			-								
fective dat	te, if other t	han the date e date must be sp	of filing	;:		C (C)	1 00 1-	(option	al)	605	: 020 7
ote: If the o	late inserted	in this block d	loes not m	iect the app	licable stat	utory filing	requiremen	nts, this d	ate will no	t be list	ed as
cument's e	nective date	on the Departi	ment of S	tate s recon	us.						
	fies a delayed	d effective date	e, but not	an effective	time, at 1	2:01 a.m. c	on the earlie	r of: (b)	The 90th	day afte	r the
is filed.											
08/15/ ated		/4/	<u></u> .	2022	<u>.</u>						
	//										
			_								
	-/5	Signa	nture of a n	nember or au	thorized re	presentative	of a member				