NAACCCC 341094

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A. BUTLER NOV - 8 2022

COVER LETTER

	gistration Se vision of Co			
SUBJECT:		bedded Systems, LLC		
SUBJECT		Name of Lim	ited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retur	m all correspo	ondence concerning this matter	to the following:	
		Carlos A. Wong		
			Name of Person	
		Helios Embedded Systems	s, LLC	
			Firm/Company	
		10025 Davis Creek Circle,	Apt 1306	
			Address	
		Orlando, FL 32832		
			City/State and Zip Code	
		carloswong54@gmail.com		
For further	information c	E-mail address: (concerning this matter, please c	to be used for future annual report r all:	iotification)
Carlos A. V	Vong		786 516-1988 at ()	
	Name o	of Person		time Telephone Number
Enclosed is	a check for the	he following amount:		
■ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ailing Addres		Street Address:	
	egistration : ivision of C	Section Torporations	Registration ! Division of C	
	O. Box 632		The Centre o	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT FILED TO ARTICLES OF ORGANIZATION 19 AM 9:54

Helios Embedded Systems, LLC

SECRETALL OF STATE TALLAHASSEE, FL

(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 C		22 and assigned
Florida document number L22000341094	<u></u> ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD)	RESS)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		- N
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, <u>e</u>	nter the name of the new registered
agent and/of the new registered office address nere.		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress
		, 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 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

Title	<u>Name</u>	Address	Type of Action
AMBR	Colin M. Ogilvie	57 Regatta Bay Court, Apt 260, Annapolis, MD 2140	I ≣Add
			_ □Remove
			Change
			_ 🗆 Add
			_ □Remove
			_ [] Change
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ective date, if other than the one effective date is listed, the date must te: If the date inserted in this blocument's effective date on the De	be specific and a ak does not m	cannot be prior eet the applica	o date of filing o	or more than 90 d	_ (optional) ays after filing.) ents, this date v	Pursuant to 605.03 will not be listed
ecord specifies a delayed effective is filed.	date, but not a	an effective tii	me. at 12:01 a.	m. on the earli	er of: (b) The	: 90th day after t
ed August 11		2022				
		arlos K	. Wong	tive of a membe		
						