L22000350565

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A. RAMSEY DEC 13 2022

COVER LETTER

	gistration Se ision of Cor		•	
SHRIFCT:	TekTek Co	nsulting LLC		
., or in the second	-		ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	n all correspo	ndence concerning this matter	to the following:	
		Stephanie Goebel		
			Name of Person	
		ZenBusiness Inc.		
			Firm/Company	
		5511 Parkerest Drive, Ste.	103	
			Address	
		Austin, TX 78731		
			City/State and Zip Code	
		fulfillment@zenbusiness.co	om to be used for future annual report notif	
For further i	nformation c	oncerning this matter, please ca	·	ication)
Stephanie G	iochel c/o Ze	nBusiness Inc.	844 493-6249 at ()	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a	a check for th	ne following amount:		
■ \$25.00 E	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)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION [] [[]] OF

2022 SEP 19 PH 12 46

TekTek Consulting LLC

company has been notified in writing of this change.

(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 Compa	ny were filed on 08/09/2022	and assigned
Florida document number 1.22000350565		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
Emerging Tek Advisors LLC		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered	office address on our recor	ds, enter the name of the r
registered agent and/or the new registered office address ho	<u>ere</u> :	
Name of New Registered Agent:		
Name of New Registered Agent: New Registered Office Address:		
	Enter Florida street add.	ress
	City	ress F lorida Zip Code

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>	Name	<u>Address</u>	Type of Action
			□ Remove
			Change
			Add
			Remove
			Change
			Remove
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ffective date, if other than the d an effective date is listed, the date must b lote: If the date inserted in this bloc ocument's effective date on the Dep	be specific and cannot be prior k does not meet the applic	to date of filing or more table statutory filing red	(optional) han 90 days after filing.) Pu quirements, this date wil	rsuant to 605.0207 I not be listed as
e record specifies a delayed of The 90th day after the recor	effective date, but noed is filed.	t an effective time	e, at 12:01 a.m. on	the earlier o
ated September 7	2022	<u> </u>		
	· · · · · · · · · · · · · · · · · · ·			
/s/ Kyle Woytek				
	gnature of a member or author	rized representative of a	member	

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Filing Fee: \$25.00