L23000369172

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Vimana Technical Solutions, LLC			
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears or I Liability Company)	n our records.)	
he Articles of Organization for this Limited Liability Compan	y were filed on 8/7/20	23	and assigned
lorida document number 1.23000369172			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited lia	bility company here:	:	
ne new name must be distinguishable and contain the words "Limited Liab	hility Company," the desig	nation "LLC" or the al	obreviation "L.L.C."
nter new principal offices address, if applicable:	<u> </u>		
Principal office address MUST BE A STREET ADDRESS)			
			·-· <u>-</u> ····-
			1
nter new mailing address, if applicable: **Initing address MAY BE A POST OFFICE BOX** **Initing address MAY BE A			
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		. ,	:
. If amending the registered agent and/or registered office	address on our reco	rds, enter the nan	ne of the new regis
gent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida	street address	
		, Florida	
	Civ	, rioriua	Zip Code
lew Registered Agent's Signature, if changing Registered Agen	<u>t:</u>		

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. <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Michael Starkey	12390 E Lasalle Pl	■Add
		Aurora, CO 80014	
			Change
			🖸 Add
			□Remove
			□Change
			□Add ·
			: ⊡Remove
			☐Change
			□Add
		- 	□Remove
			□Change
			□Add
			□Remove
			Change
			[]Add
			□Remove
			□ Change

COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations						
Data trem	Vimana Te	chnical Solutions, LLC						
Name of Limited Liability Company								
The enclosed	I Articles of	Amendment and fee(s) are sub	omitted for filing.					
Please return	all correspo	endence concerning this matter	to the following:					
		Evan DeCoste						
		. 19197	Name of Person					
		Vimana Technical Solutio	ns. LLC					
			Firm/Company					
		48 John St						
			Address	٠ ٦				
		St Augustine, FL 32084						
			City/State and Zip Code	1				
		evan@vimanasearch.com	to be used for future annual report no	Wastern				
For further in	aformation o	oncerning this matter, please c	•					
Evan DeCos		y	970 398-0464	, 3				
		f Person		ne Telephone Number				
	Name o	r Person	Area Code Daytir	ne Telephone Number				
Enclosed is a	check for th	ne following amount:						
□ \$25.00 F	iling Fee	S30.00 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)				
	ling Addres		Street Address:	. •				
_	gistration S		Registration Se					
	asion of C Box 632	orporations 7	Division of Co The Centre of					
	lahassee, F			rananassee se Street Suite 810				

Tallahassee, FL 32303

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<u>lote:</u> If	date, if other ive date is listed, the date inserte t's effective da	d in this bloc	k does not i	meet the ap	plicable s	of filing or tatutory file	more than 9 ng require	(optio days after ments, this	nal) filing.) Pur date will	suant to 605.020 not be listed a
is filed			late, but no	t an effecti	ve time, a	12:01 a.m	. on the ca	rlier of: (b)	The 90t	h day after the
ated	11-4	-23	7	·						
		11/1/				_				

Filing Fee: \$25.00