L23000479421

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| Special instructions to 1 lining officer. |

Office Use Only



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IMPORTANT NOTICE



PLEASE SEND ALL DOCUMENTS – APPROVED OR REJECTED TO THE ADDRESS BELOW.

INC AUTHORITY ATTN: CORPORATE MAINTENANCE LEAD

1450 VASSAR ST RENO, NV 89502

OR

RETURNDOCS@INCAUTHORITY.COM

TO: PHYSICAL: Dept. of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING: Dept. of State

Division of Corporations

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM: Inc Authority, LLC

1450 Vassar St Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE: Thursday, November 02, 2023

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

• Articles of Amendment

For: PRO TEK GLOBAL, LLC

We have included payment in the amount of \$25.00 for the following fees:

Filing Fee

We have included one original and one copy.

If there are any questions, please call 800-638-2320

Please return the file stamped copy of Amendment to Articles of Organization to the address below:

Processing Department 1450 Vassar St Reno NV 89502

COVER LETTER

| TO: | Registration Se Division of Cor | | | | |
|--|------------------------------------|---|---|--|--|
| SUBJI | ECT: PRO TE | K GLOBAL LLC | | | |
| | | Name of Lim | ited Liability Company | | |
| The en | iclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | | |
| Please | return all correspo | ondence concerning this matter | to the following: | | |
| | | Corpor | ate Maintenance Lea | ad | |
| | | | Name of Person | St O2 c Greport notification) S38-2320 Daytime Telephone Number S60,00 Filing Fee. Certificate of Status & Certificate of Status & Certified Copy radditional copy is enclosed. CT/COURIER ADDRESS: ation Section in of Corporations. Building | |
| Processing Department | | | | | |
| | Firm Company | | | | |
| | | | 1450 Vassar St | | |
| | | · · · · · · · · · · · · · · · · · · · | Address | | |
| | | | Reno, NV 89502 | | |
| | | | City State and Zip Code | | |
| | | fi-mail address; (| to be used for future annual report notif | ication) | |
| For tui | rther information c | oncerning this matter, please c | ali | | |
| | Process | ing Department | ar, 800 - 1, 638-2320 | | |
| | | i Person | Area Code Daytime | : Telephone Number | |
| Enclos | sed is a check for ti | he following amount: | | | |
| | 5 no Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55 (0) Filling Fee & Certified Copy (additional copy is enclosed) | Certificate of Status & Certified Copy | |
| | Registr | ING ADDRESS: ation Section on of Corporations | STREET/COURH Registration Section Division of Corpora | n | |
| P.O. Box 6327 Tallahassee, FL 32314 | | | Clifton Building 2661 Executive Cer | | |

Tallahassee, Fl. 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRO TEK GLOBAL, LLC (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 Company were filed on 10/19/23 and assigned Florida document number L23000479421 This amendment is submitted to amend the following: 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 Lability Company," the designation "LTC" 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 records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

Cin

If Changing Registered Agent, Signature of New Registered Agent

Florida

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 |
|--------------|--------------------|------------------------------|----------------|
| MGR | Adrienne Ramjattan | 10742 Greentrail Drive South | |
| | | Boynton Beach, FL 33436 | ☑ Remove |
| | | | Change |
| MGR_ | Ranaa Ramjattan | 10742 Greentrail Drive South | Ø Add |
| | | Boynton Beach, FL 33436 | Remove |
| | | <u> </u> | ☐ Change |
| | | | |
| | | | □ Remove |
| | | | Change |
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| | | | Change |
| | | | Add |
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| | | | D Add |
| | | | Remove |
| | | | Chaper |

| | Adrienne Ramjattan is listed as manager twice. Please remove one of | | | | | |
|------------|--|--|--|--|--|--|
| ŧ | the listings and replace with Ranaa Ramjattan. | | | | | |
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| . 4 ! | ive date, if other than the date of filing: N/A (optional) | | | | | |
| eti eti | ive date, if other than the date of filing: (1977) (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 | | | | | |
| | If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed | | | | | |
| 7111 | nent's effective date on the Department of State's records. | | | | | |
| | | | | | | |
| | cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie 90th day after the record is filed. | | | | | |
| | Sour day arter the record is med. | | | | | |
| | | | | | | |
| ·C | <u>10-29-2023</u> | | | | | |
| | Signature of a member or authorized representative of a member | | | | | |
| | | | | | | |

Page 3 of 3

Filing Fee: \$25.00