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(R	Requestor's Name)
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	WAIT MAIL
(8	lusiness Entity Name)
۵)	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:
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11/30/23--01022--024 **25.00



		.' .	COVE	R LETTER	
TO:	Registration S Division of Co				
SUBJE	СТ: '	TECH	BARGAIN	LLC	
			Name of Limited Liabil	hty Company	—

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:



For further information concerning this matter, please call:



<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 $\frac{11/20/2023}{2023}$ and assigned Florida document number $\frac{L23000521497}{2023}$

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 Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	1.
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office add agent and/or the new registered office address here:	dress on our records, <u>enter the name of themew registered</u>

it and/or the new registered once address here:		· .		13455 14 14
Name of New Registered Agent:		-	29	
New Registered Office Address:			PH	=)
	Epter Florida street address	[·) (·)	ب	V
	, Florida		46	
	1. City	Zip Ce	ode	

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

<u>Title</u>	Name	Address	<u>Type of Action</u>
MGR	Wosom Mahlad	2040 Greenview shares B	Ind DAdd
		Wellington, FL, 33414	🛛 Remove
			□Change
<u>M6R</u>	Ravaida Mekled	2040 Greenview shores B	Ivd 🗆 Add
		Wellington, FL, 33414	Remove
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		. <u></u>	□Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	;
	Signature of a member or authorized representative of a member
	Amir Maklad
	Typed or printed name of signee