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COVER LETTER

TO: Registration Section **Division of Corporations** TERIS TECH PROPERTY MANAGEMENT LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: GREGORY CODNER Name of Person TERIS TECH PROPERTY MANAGEMENT LLC Firm/Company 2020 W MCNAB RD APT 2 Address FORT LAUDERDALE, FL 33309 City/State and Zip Code TERISTECH@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: GREGORY CODNER 954 937-7128 Daytime Telephone Number Name of Person Enclosed is a check for the following amount: **■** \$25.00 Filing Fee □ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certificate of Status Certificate of Status & Certified Copy Certified Copy radditional copy is enclosed) (additional copy is enclosed). Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TERIS TECH PROPERTY MANAGEMENT LLC

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records. Hability Company)	1
The Articles of Organization for this Limited Liability Company florida document number $\frac{1.24000159034}{1.24000159034}$	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC"	or the abbreviation "L.L.C,"
Enter new principal offices address, if applicable:	6994 Columbia Ct	
(Principal office address MUST BE A STREET ADDRESS)	Margate FL 33063	
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX)</u>	6994 Columbia Ct Margate FL 33063	
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, <u>enter t</u> l	he name of the new regi
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:	Enter Florida street address	
	. Flor	rida
	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 Changing Registered Agent, Signature of New Registered Agent

1

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>	<u>Name</u>	<u>Address</u>	Type of Action
Manager	Gregory Codner	6994 Columbia Ct Margate FL 33063	
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			□ Change

	04/02/2024
an ef (ote:	tive date, if other than the date of filing:
	rd 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 iled.
1 15 f	
	20NG 10 2024
	30NG 10 2024
d is f	Signature of a member or authorized representative of a member