L24000175427

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(Business Entity Name)
(Document Number)
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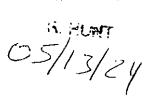
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:	PIVIT DYN	AMICS, LLC		
SOBILCI.		Name of Lim	ited Liability Company	
The enclosed	l Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		Jacqueline Sherbertes		
			Name of Person	
			Firm/Company	
		9175 Trivoli Terrace	Address	
		Naples, FL 34119	Address	
		Jacqueline.sherbertes@gma	City/State and Zip Code	
			to be used for future annual report not	ification)
For further is	nformation co	oncerning this matter, please ca	all:	
Jacqueline S	herbertes		774 487-8438 at ()	
	Name of	Person	Area Code Daytin	ne Telephone Number
Enclosed is	a check for th	e following amount:		
□ \$25.00 I	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Re Di P.(iling Address gistration S vision of C D. Box 632 Ilahassee, I	Section orporations 7	Street Address: Registration Se Division of Co The Centre of 1	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Company as it now app (A Florida Limited Liability Compan	ears on our records.)	
e Articles of Organization for this Limited	Liability Company were filed on	4/15/24	_ and assigned
orida document number L24000175427	·		
is amendment is submitted to amend the fo	llowing:		
If amending name, enter the new name	of the limited liability company	here:	
tan Tech Advisors , LLC			
e new name must be distinguishable and contain the	words "Limited Liability Company," th	e designation "LLC" or the abbr	eviation "L.L.C."
nter new principal offices address, if appl	icahle:	- •	***
			<u> </u>
rincipal office address MUST BE A STRE	<u>ET ADDRESS)</u>	- , ·	
		<u> </u>	C.C
iter new mailing address, if applicable:			
•			<u>ස</u>
<u>ailing address MAY BE A POST OFFICI</u>	<u> </u>	1.1	
		 	
If amending the registered agent and/or ent and/or the new registered office addr		r records, <u>enter the name</u>	of the new regis
ent and/or the new registered office andr	ess nere:		
Name of New Registered Agent:	Jacqueline Sherbertes		
New Registered Office Address:	9175 Trivoli Terrace		
	Enter 1	lorida street address	
	Naples	, Florida ³⁴¹¹	9
		, 1°1011444	

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

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>	Address	Type of Action
MGR	Mark Sherbertes	9175 Trivoli Terrace, Naples, FL 34119	
			□Remove
			Change
MGR	Jacqueline Sherbertes	9175 Trivoli Terrace, Naples, FL 34119	□Add
			⊠Remove
			□ Change
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	if other than the date is listed, the date must be spe		to date of filing or worse to	(optional)	to 605 020
te: If the dat	e inserted in this block do	es not meet the applica	able statutory filing req	uirements, this date will r	not be listed as
ument s erre	ctive date on the Departm	ient of State's records.			
cord specifie	s a delayed effective date,	, but not an effective ti	me, at 12:01 a.m. on th	e earlier of: (b) The 90th	h day after the
s fi led .					•
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od	7 1	, <u>~~</u>	· // //		
	_ Jarquel	ine Shew	bettes d name of signee		
	Signat	ure of a member or author	orized representative of a i	петвет	
	Jacquel	. 01	1		