

From:

L9700000 01131

08/17/2018 17:16

#037 P.001/004

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:  
Division of Corporations  
Fax Number : (850) 617-6392

From:  
Account Name : COGENCY GLOBAL, INC.  
Account Number : 120000000088  
Phone : (800) 221-0102  
Fax Number : (800) 944-6607

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECTOR M/MG RESIGN  
J. TECH SALES, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	03
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2018 MAY 18 AM 8:38

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

2018 MAY 18 AM 8:09

FILED

From:

05/17/2018 17:16

#037 P.002/004

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

J. Tech Sales, L.L.C.

(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 October 7, 1997 and assigned  
Florida document number L97000001131.

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 "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

Florida

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

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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>	<u>Type of Action</u>
AMBR	Maroon Group, LLC	1390 Jaycox Road	<input checked="" type="checkbox"/> Add
		Avon, Ohio 44011	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jeffrey Tannenbaum	3761 Coventry Lane	<input type="checkbox"/> Add
		Boca Raton, FL 33496	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Jeffrey Tannenbaum	3761 Coventry Lane	<input type="checkbox"/> Add
		Boca Raton, FL 33496	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Barry Tannenbaum	19250 S Creekshore Ct	<input type="checkbox"/> Add
		Boca Raton, FL 33498	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Jeffrey Tannenbaum 2014 Irrevocab	3761 Coventry Lane	<input type="checkbox"/> Add
		Boca Raton, FL 33496	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Susan Tannenbaum 2014 Irrevocab	3761 Coventry Lane	<input type="checkbox"/> Add
		Boca Raton, FL 33496	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Add Maroon Group, LLC as Manager

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Address: 1390 Jaycox Road, Avon, Ohio 44011

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2018 MAY 18 AM 8:04  
TALLAHASSEE, FLORIDA

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F. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective 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 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 May 16, 2018

*Brinn S. Wilson*

Signature of a member or authorized representative of a member

Brinn S. Wilson

Typed or printed name of signer