Florida Department of State

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Division of Corporations

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COR AMND/RESTATE/CORRECT OR O/D RESIGN **TECH MIAMI INC.**

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FAX COVER SHEET

ТО		
COMPANY		
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COVER MESSAGE

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: TECH MIA	AMI INC.	
DOCUMENT NUMBER: N15000002	902	
The enclosed Articles of Amendment and fee are subn	nitted for filing.	
Please return all correspondence concerning this matter	r to the following:	
imelo	la Vasquez	
	(Name of Contact Person)
Legalzo	oom.com, Inc.	
	(Firm/ Company)	
100 W. Broadway Suite 100		
	(Address)	
Glenda	ile, CA 91210	
	(City/ State and Zip Code	e)
d.capelli@umiami.edu		
E-mail address: (to be used	for future annual report r	notification)
For further information concerning this matter, please	call:	
Imelda Vasquez	323 at (962-8600
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made page	yable to the Florida Depa	rtment of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	S43,75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle issec, FL 32301

To: Page 4 of 7

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	Articles of Amendment	VIV 40 19 We 30	
	to	15 出7 22 显微 39	
	Articles of Incorporation of	e e e e e e e e e e e e e e e e e e e	
TECH MIAMI INC.	- ,	TALLAHLISEE, PLORIDA	ı
(Name of Corporation as currently fi	led with the Florida Dept. of State)		
N15000002902		<i>i</i> to,	
(Docume	ent Number of Corporation (if known)		
Pursuant to the provisions of section 617,1006 amendment(s) to its Articles of Incorporation:		or Profit Corporation adopts the following	lowin
A. If amending name, enter the new name	of the corporation:		
			he ne
name must be distinguishable and contain the "Company" or "Co." may not be used in the	: word "corporation" or "incorporated <u>: name</u> .	d" or the abbreviation "Corp." or '	"Inc.
B. Enter new principal office address, if ap			
(Principal office address MUST BE A STRE	(ET ADDRESS)		
C. Enter new muiling address, if applicable	le:		
(Mailing address MAY BE A POST OFF			
		· ·	
		<u></u>	
D. If amending the registered agent and/or	r registered office address in Florida.	enter the name of the	
new registered agent and/or the new re			
Name of New Registered Agent:			
New Registered Office Address:	(Florida street address)		
		, Florida	
-	(City)	(Zip Code)	
New Registered Agent's Signature, if change	vina Registered Agent		
I hereby accept the appointment as registered		the obligations of the position.	

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

 $P \sim President; V \sim Vice President; T \sim Treasurer; S \sim Secretary; D \sim Director; TR \sim Trustee; C \sim Chairman or Clerk; CEO \sim Chief Executive Officer; CFO + Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change X_Remove X_Add	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
I) Change	TD	ANSH GROVER	485 BRICKELL AVE., APT 3807
Add			MIAMI, FL 33131
X Remove			
2) X Change	PTD	DAVID CAPELLI	485 BRICKELL AVE., APT 3807
Add			MIAMI, FL 33131
Remove			
3)Change	<u>D</u>	Tereska Lynam	485 BRICKELL AVE., APT 3807
X Add			MIAMI, FL 33131
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
(honou			
6) Change			
Add			
Remove			

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E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
(attach additional sheets, if necessary).	(Be specific)		
	•		
 :			
•			
_			
			

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The date of each amendment(s) a	04/28/2015	, if other than the
date this document was signed.	•	
Effective date if applicable:		<u> </u>
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a was/were sufficient for approx	adopted by the members and the number of votes cast for the amendment(s) val.	
There are no members or men adopted by the board of direct	nbers entitled to vote on the amendment(s). The amendment(s) was/were tors.	
Dated	05/1/150	
Signature	Cappille	
	irman or vice chairman of the board, president or other officer-if directors een selected, by an incorporator – it in the hands of a receiver, trustee, or	
	t appointed fiduciary by that fiduciary)	
DAVID C	APELLI	
	(Typed or printed name of person signing)	
President		
	(Title of person signing)	