Form 403 (Revised 05/11)

Submit in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555

FAX: 512/463-5709

Certificate of Correction

This space reserved for office use.

Filing Fee: \$15			
	E	ntity Information	
1. The name of the filing entity	y is:		
AMG TEK Solutions LLC			
State the name of the entity as curr corrects the name of the entity, state	ently shown the present r	in the records of the secretary of name and not the name as it will be	state. If the certificate of correction corrected.
The file number issued to the f	iling entity	by the secretary of state is:	804282966
]	Filing In	strument to be Correcte	ed
2. The filing instrument to be	corrected i	s: CERTICATE OF FORMA	TION
The date the filing instrument	was filed v	with the secretary of state:	10/22/2021
			mm/dd/yyyy
(Indicate the errors that have bee	n made by cl	on of Errors and Corrected hecking the appropriate box or box on hecking the appropriate box or box or box of hecking the appropriate box or box	es; then provide the corrected text.)
The registered agent name name is:	is inaccur	ate or erroneously stated. The	e corrected registered agent
		orrected Registered Agent lete either A or B, but not both.)	
A. The registered agent is an o	organizatio	n (cannot be entity named above) by	the name of:
OR			
B. The registered agent is an i	ndividual i	resident of the state whose na	me is:
Ajita		Degala	
First	Middle	Last Name	Suffix
			registered agent, whose name is ed agent at the time the filing

instrument being corrected took effect.

The registered office address address is:	s is inaccurate or erroneously state	d. The corrected registered office
MULIC 55 15.	Corrected Registered Office Address	
		TX
Street Address (No P.O. Box)	City	State Zip Code
The purpose of the entity is in follows:	naccurate or erroneously stated. The	ne purpose is corrected to read as
The period of duration of the	entity is inaccurate or erroneously ed to read as follows:	stated.
(Indicate the other errors and correction	fication of Other Errors and Corns that have been made by checking and cons. The following inaccuracies and	ompleting the appropriate box or boxes.)
		I be added to the filing instrument. Il text of the provision is set forth
to be corrected. The full text of ARTICLE 3: GOVERNING AUTH	each corrected provision is set forth	
Delete Each of the provision	ns identified below was included in	error and should be deleted.
1		

Defective Execution The filing instrument was defectively or erroneously signed, sealed, acknowledged or verified. Attached is a correctly signed, sealed, acknowledged or verified instrument.
Statement Regarding Correction
The filing instrument identified in this certificate was an inaccurate record of the event or transaction evidenced in the instrument, contained an inaccurate or erroneous statement, or was defectively or erroneously signed, sealed, acknowledged or verified. This certificate of correction is submitted for the purpose of correcting the filing instrument.
Correction to Merger, Conversion or Exchange
The filing instrument identified in this certificate of correction is a merger, conversion or other instrument involving multiple entities. The name and file number of each entity that was a party to the transaction is set forth below. (If the space provided is not sufficient, include information as an attachment to this form.)
Entity name SOS file number
Entity name SOS file number
505 jue number
Effectiveness of Filing
Effectiveness of Filing After the secretary of state files the certificate of correction, the filing instrument is considered to have been corrected on the date the filing instrument was originally filed except as to persons adversely affected. As to persons adversely affected by the correction, the filing instrument is considered to have been corrected on the date the certificate of correction is filed by the secretary of state.
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Ajita Degala
Printed or typed name of authorized person (see instructions)