## L12000079651

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(Ad	dress)		
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(Cit	ry/State/Zip/Phon	e #)	
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J. BRYAN

SEP 2 0 2012

**EXAMINER** 

## **COVER LETTER**

TO: Registration Sect Division of Corpo	ion Pration RELIABLE TE	ECHSYSTEMS LLC		•	
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of A	mendment and fee(s) are su	hmitted for filing			
	dence concerning this matter	-			
	<b>.</b>	Joseph F. Romero			
	Harachers and release the audit release the delice of a delice and the forest the construction	Name of Person			
RELIABLE TECHSYSTEMS LLC		LC			
	Firm/Company				
	8320	SW 150 Avenue, Unit 10	04		
		Address			
		Miami, FL 33193		<b>三维</b>	
		City/State and Zip Code	<del></del>	<u> </u>	
	E-mail address:	itbyjr@gmail.com to be used for future annual report no	otification)	P 19	<u> </u>
For further information cor	ncerning this matter, please	call:		9 P	
	Romero	at ( 305 )	385-6898	PH 3: 15	
Name of I	Person	Area Code & Day	ime Telephone Number	3 To	
Enclosed is a check for the	following amount:				
□ \$25.00 Filing Fee	Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	60.00 Filing Fee Certificate of St Certified Copy (additional copy	atus &	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



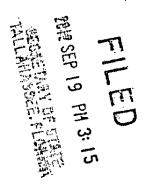
## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 10, 2012

JOSEPH F. ROMERO RELIABLE TECHSYSTEMS LLC 8320 SW 150 AVENUE, UNIT 104 MIAMI, FL 33193

SUBJECT: RELIABLE TECHSYSTEMS LLC

Ref. Number: L12000079651



We have received your document for RELIABLE TECHSYSTEMS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan Regulatory Specialist II

Letter Number: 112A00022736

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Mpany as it now appear ted Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liability Comp.  Florida document number <u>L120000 79451</u> .	pany were filed on <u>Ø</u>	$\frac{96/10./2012}{\text{and assigned}}$		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited RELIABLE TEC	liability company her CH SYSTEMS, LLC	e: C		
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Compa	ny," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	-	1 23		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	76 3		
		7/1		
		19		
Enter new mailing address, if applicable:	<del></del>			
(Mailing address MAY BE A POST OFFICE BOX)		-n" = (		
B. If amending the registered agent and/or registered		5		
registered agent and/or the new registered office address	<u>here</u> :			
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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma $MGRM = N$	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
·			
			d Kemove
			d temove
D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	PICE PIP PM 3: 15
Dated	Signature of a member	or or authorized representative of a member  Romero Tor printed name of signee	<del></del>

Page 2 of 2

Filing Fee: \$25.00