

L15000008859

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SEP 13 2016
D. BRUCE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SUMMIT TECHNOLOGY, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHAEL H. JOHNSON
Name of Person

SUMMIT TECHNOLOGY, LLC
Firm/Company

3606 W. SAN PEDRO ST
Address

Tampa FL 33629
City/State and Zip Code

MICHAELHJOHNSON@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL H. JOHNSON at (813) 391-7933
Name of Person Area Code Daytime Telephone Number

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Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

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>
MGR	KERRI J. KOBAKOF	1135 45th Avenue North	<input type="checkbox"/> Add
		ST. PETERSBURG FL 33703	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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 COUNTY CLERK'S OFFICE

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

MGR. Marija C. Johnson
3606 W. SAN PEDRO ST
TAMPA FL 33629

Please change MIDDLE INITIAL FROM "L" to "C"

Thank you

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TALLAHASSEE

E. Effective date, if other than the date of filing: 9/8/16 (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 _____, _____

MICHAEL JOHNSON

Signature of a member or authorized representative of a member

Marija Johnson


Typed or printed name of signee

Marija Johnson

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: SUMMIT TECHNOLOGY LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

1135 45th Avenue North
ST. PETERSBURG, FL 33703

1135 45th Avenue North
ST. PETERSBURG, FL 33703

3. 1/15/15
Date of filing/registration in Florida

4. L15000008859
Document number

5. (a) KERRI J. KOBAKOF
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1135 45th Avenue North
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

St. Petersburg, FL 33703

(b) MICHAEL H. JOHNSON
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

3606 W. SAN PEDRO ST
NEW Registered Office Address:

TAMPA, FL 33629

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member Printed or typed name of signee

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.

[Signature]
Signature of Registered Agent