

L15000093351

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

X



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 3, 2020

TAS FORENSICS LLC  
451 MONACO DRIVE  
INDIALANTIC, FL 32903

SUBJECT: TAS FORENSICS, LLC  
Ref. Number: L15000093351

We have received your document for TAS FORENSICS, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Yasemin Y Sulker  
Regulatory Specialist III

Letter Number: 720A00021989

COVER LETTER

TO: Registration Section  
Division of Corporations

TAS FORENSICS LLC

SUBJECT: \_\_\_\_\_  
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:

DR. JEAN-MARIE VAN DER ELST

\_\_\_\_\_  
Name of Person

TAS FORENSICS LLC

\_\_\_\_\_  
Firm/Company

451 MONACO DRIVE

\_\_\_\_\_  
Address

INDIALANTIC, FLORIDA 32903

\_\_\_\_\_  
City/State and Zip Code

JMELST@ICLOUD.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JEAN-MARIE VAN DER ELST

321 9874967

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

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 Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2020 SEP 24 PM 12:17

FILED

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

TAS FORENSICS LLC

(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 MAY 29, 2015 and assigned

Florida document number L15000093351

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:**

3210 N WICKHAM ROAD STE 4

**(Principal office address MUST BE A STREET ADDRESS)**

MELBOURNE

FLORIDA 32935

**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

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

IGR = Manager  
MBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
CEO/MGR	MARIA PORTERO COLLADO	451 MONACO DRIVE	<input type="checkbox"/> Add
		INDIALANTIC FL 32903	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
CEO/MGR	JEAN-MARIE VAN DER ELST	451 MONACO DRIVE	<input type="checkbox"/> Add
		INDIALANTIC FL 32903	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

CHANGE OF OWNERSHIP PARTICIPATION EFFECTIVE 01 NOVEMBER 2020

MARIA PORTERO COLLADO, CEO/MGR. FIFTY (50) UNITS/SHARES

JEAN-MARIE VAN DER ELST, CFO/MGR. FIFTY (50) UNITS/SHARES

REQUEST:

1. NEW COPY OF AMENDED ARTICLES OF INCORPORATION

2. NEW SHARE CERTIFICATES

01 NOVEMBER 2020

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.

he 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 ord is filed.

Dated 01 NOVEMBER 2020

Signature of a member or authorized representative of a member

JEAN-MARIE VAN DER ELST

Typed or printed name of signee