M1700000 8576

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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wrong form

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K. SALY JAN 10 2018



January 8, 2018

Florida Department of State. Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Sygma Point Consulting, LLC Ref Number M17000008576

Please find enclosed a letter received from the Florida Division of Corporations regarding an amendment to Sygma Point Consulting, LLC a Foreign LLC. I have also enclosed the correct form to make changes to a foreign LLC (the form for a Florida LLC was originally sent).

Sincerely,

Samira Hossain Managing Member

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Sygma Point Consulting, L Name of Foreign Limited Liability	
Ç	
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are submitted for	filing.
Please return all correspondence concerning this matter to the fo	llowing:
Samira Hossain	
Name of Person	,
Sygma Point Consulting, LLC	
Firm/Company	
6700 Indian Creek Dr Apt 1408	
Address	
Miami Beach, FL 33141	
City/State and Zip Code	
samira.hossain@sygmapoint.com	
E-mail address: (to be used for future annual report notification	on)
For further information concerning this matter, please call:	
Samira Hossain at (786)	708-1848
Name of Person Area Code &	¿ Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee. Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount: \$\begin{align*}	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT **BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

Name of limited liability Company as it appear Sygma Point Consulting,		rida Department of
Enter new principal office address, if applicable:		
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
2. The Florida document number of this limited lia	ability company is: M1	7000008576
3. Jurisdiction of its organization: Virginia		
4. Date authorized to do business in Florida:	10/05/2017	
SECTION II (5-9 complete only the applicable	changes)	
5. New name of the limited liability company: (mus	st contain "Limited Liabilit	y Company, " "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.	naging members adopting	ting business in Florida and attach a the alternate name. The alternate name
6. If amending the registered agent and/or registere registered agent and/or the new registered office a	ed officer address on our re ddress here:	ecords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter F	lorida Street Address
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Re	gistered 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.

Title/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action	
VP_	Philip Hancock	6700 Indian Creek Dr Apt 1408		
		Miami Beach, FL 33141	Remov	
			Add	
			Remov	
			Add	
			Remove	
			Add	
			Remove	
			Add	
			Remove	

Filing Fee: \$25,00

Typed or printed name of signee



December 29, 2017

SYGMA POINT CONSULTING, LLC SAMIRA HOSSAIN 6700 INDIAN CREEK DR, APT 1408 MIAMI BEACH, FL 33141

SUBJECT: SYGMA POINT CONSULTING, LLC

Ref. Number: M17000008576

We have received your document for SYGMA POINT CONSULTING, 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):

The form you submitted is for a FLORIDA LLC, but your entity is a FOREIGN LLC. Please complete and return the enclosed blank form(s).

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.

Karen A Saly Regulatory Specialist II

Letter Number: 217A00026398

RECEIVED
JAN - 9 2018