

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u> </u>

Office Use Only



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7F25 THE TOTAL 2: 22

R. W.AT 372 21 22 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 347092 7456992
AUTHORIZATION : Smelle man
COST LIMIT : \$ 25.00
ORDER DATE : July 9, 2020
ORDER TIME : 5:25 PM
ORDER NO. : 347092-010
CUSTOMER NO: 7456992
FOREIGN FILINGS
NAME: SPECTRUM TECHNOLOGY HOLDING LLC
CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY
XXXX AMENDMENT
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Kadesha Roberson EXT# 62980

EXAMINER: \_\_\_\_



## FLORIDA DEPARTMENT OF STATE Division of Corporations

July 17, 2020

RESUBINIT
Please give original

submission date as file date.

CORPORATION SERVICE COMPANY ATTN: KADESHA ROBERSON WALK IN TALLAHASSEE, FL

SUBJECT: SPECTRUM TECHNOLOGY HOLDING LLC

Ref. Number: M20000005798

We have received your document for SPECTRUM TECHNOLOGY HOLDING LLC and the authorization to debit your account in the amount of \$25.00. However, the document has not been filed and is being returned for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Rebekah White Regulatory Specialist II Supervisor

Letter Number: 720A00013517

## COVER LETTER

TO:

Registration Section

Division of Corporations Spectrum Technology Holding LLC SUBJECT: Name of Foreign Limited Liability Company Dear Sir or Madam: The enclosed application, certificate and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Carlen C. Sellers Name of Person Polsinelli PC Firm/Company 150 N. Riverside Plaza, Ste. 3000 Address Chicago, IL 60606-1599 City/State and Zip Code doug.klein@bravas.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Carlen C. Sellers 463-6205 Name of Person Area Code & Daytime Telephone Number Street Address: Mailing Address: Registration Section Registration Section **Division of Corporations** Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: □ \$30 Filing Fee & ☐ \$55 Filing Fee & □\$25 Filing Fee □ \$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy CR2E055 (9/15)

## 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)

1. Name of limited liability Company as it appears	on the records of the Florida Department of
State: Spectrum Technology Holding LLC	
Enter new principal office address, if applicable:	9009 W. 95th Street
(Principal office address	Overland Park, KS 66212
MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	9009 W. 95th Street
(Mailing address MAY BE A POST OFFICE BOX)	0 1 10 110 00010
	Overland Park, KS 66212
2. The Florida document number of this limited lial	bility company is: M2000005798
Jurisdiction of its organization:  Delaware	
4. Date authorized to do business in Florida: 6/30/	20
SECTION II (5-9 complete only the applicable of	hanges)
5. New name of the limited liability company: Br (must	avas Florida LLC contain "Limited Liability Company, " "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or man must contain "Limited Liability Company," "L.L.C	for the purpose of transacting business in Florida and attach a aging members adopting the alternate name. The alternate name" or "LLC.")
6. If amending the registered agent and/or registere registered agent and/or the new registered office ad	d officer address on our records, enter the name of the new dress here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida Street Address
	, Florida
the provisions of all statutes relative to the proper and accept the obligations of my position as registe	gistered Agent:  t and agree to act in this capacity. I further agree to comply with  and complete performance of my duties, and I am familiar with  ared agent as provided for in Chapter 605, F.S. Or, if this  n the registered office address, I hereby confirm that the limited

If Changing Registered Agent, Signature of New Registered Agent

. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:					
le/ Capacity	Name	Address	Type of Action		
			□Add		
			□Remo		
			□Add		
			□Remo		
			□Add		
			□Remo		
			□Add		
		<del>.</del>	□Remo		
			□Add		
aforementioned ame	cate, if required: no more than 90 ndment(s), duly authenticated b e law of which this entity is orgo	y the official having custody of records in th	□Remo		
	Another.	f the authorized representative			

Filing Fee: \$25.00

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THAT THE SAID "SPECTRUM TECHNOLOGY
HOLDING LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS
NAME TO "BRAVAS FLORIDA LLC" ON THE NINTH DAY OF JULY, A.D.
2020, AT 2:21 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED
LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT
HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS
OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



Authentication: 203316849 Date: 07-21-20

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