

1/8/2016 10:52:35 AM From: To: (850)617-5383 (1/4)

MIS000008106

Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 205-8842  
Fax Number : (850) 878-5368

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
GE CAPITAL INFORMATION TECHNOLOGY SOLUTIONS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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JAN 11 2016

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GE Capital Information Technology Solutions, LLC  
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:

Yvonne Miller

Name of Person

GE Capital

Firm/Company

901 Main Avenue

Address

Norwalk, CT 06851

City/State and Zip Code

yvonne1.miller@ge.com

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

For further information concerning this matter, please call:

Yvonne Miller

Name of Person

at (203) 750-7054

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:

☐ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

**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: GE Capital Information Technology Solutions, LLC

Enter new principal office address, if applicable: \_\_\_\_\_

(Principal office address)  
MUST BE A STREET ADDRESS

Enter new mailing address, if applicable: \_\_\_\_\_

(Mailing address)  
MAY BE A POST OFFICE BOX

2. The Florida document number of this limited liability company is: M15000008106

3. Jurisdiction of its organization: CA

4. Date authorized to do business in Florida: 10/09/2015

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: \_\_\_\_\_  
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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

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7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MBR</u>	<u>General Electric capital Corporation</u>	<u>201 Merritt 7, Norwalk CT 06851</u>	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
<u>MBR</u>	<u>General Electric Real Estate Equities, Inc.</u>	<u>901 Main Avenue, Norwalk CT 06851</u>	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
<u>MBR</u>	<u>General Electric Capital Business Asset Funding Corporation of Connecticut</u>	<u>901 Main Avenue, Norwalk CT 06821</u>	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
<u>MBR</u>	<u>GE Capital Commercial of Utah LLC</u>	<u>8377 E. Hartford Avenue, Scottsdale AZ 85255</u>	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required; no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

*Yvonne Miller*

Signature of the authorized representative

**Yvonne Miller**

Typed or printed name of signee

Filing Fee: \$25.00

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