

830046

(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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300375048313

Amend

10/18/21---01031---007 **\$1.25

CLERK OF SUPERIOR COURT

2021 NOV 10 PM 12 14

FILED

A. RAMSEY

NOV 10 2021

*00789, 00524, 00671

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Motorola Solutions, Inc.
Name of Corporation

DOCUMENT NUMBER: 830046

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Judith Jean-Pierre
Name of Contact Person

Motorola Solutions, Inc.
Firm/Company

500 West Monroe Street
Address

Chicago IL 60661
City/State and Zip Code

Judy.Jean-Pierre@motorolasolutions.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Judy Jean-Pierre at 954 547-4037
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$35 Filing Fee
Paid
Previously

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy

☐ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 29, 2021

JUDITH JEAN-PIERRE
MOTOROLA SOLUTIONS, INC.
500 WEST MONROE ST, 43RD FLOOR
CHICAGO, IL 60661 US

SUBJECT: MOTOROLA SOLUTIONS, INC.
Ref. Number: 830046

We have received your document for MOTOROLA SOLUTIONS, INC. and your check(s) totaling \$61.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document that you submitted is incorrect. It is for a Florida profit corporation and your entity is a foreign (out of state) corporation. I have enclosed the correct form 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) 245-6823.

Annette Ramsey
OPS

Letter Number: 421A00026404

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

830046

(Document number of corporation (if known))

1. Motorola Solutions, Inc.
(Name of corporation as it appears on the records of the Department of State)

2. Delaware
(Incorporated under laws of)

3. _____
(Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? N/A

5. N/A
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

N/A
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

N/A
(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent No change
(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

FILED
2021 NOV 10 PM 12:14
SEC. OF STATE
TALLAHASSEE, FL

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>VP</u>	<u>Robert E. Marshall, Jr.</u>	<u>1700 Belle Mead Court</u> <u>Lawrenceville GA 30043</u>	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>SPTVP</u>	<u>Marshall Wright</u>	<u>1700 Belle Mead Court</u> <u>Lawrenceville GA 30043</u>	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>RVP</u>	<u>Scott Adler</u>	<u>401 E. Las Olas Boulevard, 16th Floor</u> <u>Ft. Lauderdale FL 33301</u>	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>TVP</u>	<u>Daniel "Danny" Sanchez</u>	<u>401 E. Las Olas Boulevard, 16th Floor</u> <u>Ft. Lauderdale</u>	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>SPTVP</u>	<u>Raj Iyer</u>	<u>18931 Santa Maria Drive</u> <u>Baton Rouge, LA 70809</u>	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>ASM</u>	<u>Michelle Poole</u>	<u>401 E. Las Olas Boulevard, 16th Floor</u> <u>Ft. Lauderdale, FL 33301</u>	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>AS</u>	<u>Judith Jean-Pierre</u>	<u>500 West Monroe Street</u> <u>Chicago IL 60661</u>	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>AS</u>	<u>Rodrigo Olazabal</u>	<u>401 E. Las Olas Boulevard, 16th Floor</u> <u>Ft. Lauderdale FL 33301</u>	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>AS</u>	<u>Francisco Rodriguez</u>	<u>401 E. Las Olas Boulevard, 16th Floor</u> <u>Ft. Lauderdale, FL 33301</u>	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

☐ Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Judith Jean-Pierre

(Typed or printed name of person signing)

Assistant Secretary

(Title of person signing)

FILING FEE \$35.00