

A 31783

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

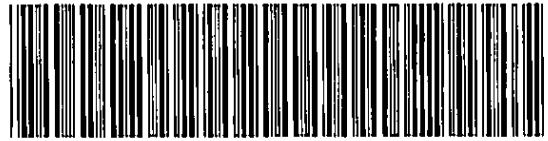
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600318256926

09/17/18--01029--020 **35.00

201 OCT 15 A 8:30

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 21, 2018

ALEJANDRO TAVERA
2170 S SR 434 SUITE 400
LONGWOOD, FL 32779

SUBJECT: ATEC SYSTEMS, LTD.
Ref. Number: A31783

We have received your document for ATEC SYSTEMS, LTD. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please revise application if you're changing the Registered Agents name or address.

WE ARE CHANGING AGENT NAME , THANKS.

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.

Dionne M Scott
Regulatory Specialist II

Letter Number: 118A00019785

RECEIVED
OCT 15 2018

FILED

OCT 15 4 30 PM '18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ATEC SYSTEMS, LTD
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A31783

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Alejandro Tavera
Contact Person

ATEC Systems, LTD
Firm/Company

2170 W SR 434, Suite 400
Address

LONGWOOD, FL 32779
City, State and Zip Code

alejandro.tavera@atecsystems.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alejandro Tavera at (407) 949-2010
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Florida Department of State.

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED
JAN 15 10 30

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. ATEC SYSTEMS, LTD
Name of Limited Partnership or Limited Liability Limited Partnership

2. JULY 23, 1991
Date of filing/registration in Florida

3. A31783
Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Associates
IEI Management, INC
650 S Normlake Blvd
476 DESOTO DRIVE Suite 400
Altamonte Springs 32701
NEW SMYRNA BEACH, FL 32169
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

IEI Management, LLC
Name
476 DESOTO DRIVE
Florida street address (P.O. Box not acceptable)
NEW SMYRNA BEACH FL 32169
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

[Signature]
Signature of General Partner

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.

[Signature]
Signature of Registered Agent

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

FILED
JUL 15 A 8:30