

L01000005674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

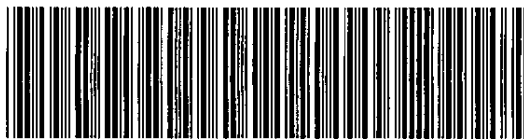
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900158049599

07/09/09--01020--014 **55.00

FILED

2009 JUL -9 AM 11:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

JUL 10 2009

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SYSNET ENGINEERING, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

WILLIAM S. DISMUKES

Name of Person

SYSNET ENGINEERING, LLC

Firm/Company

12459 PLEASANT GREEN WAY

Address

BOYNTON BEACH, FL 33437

City/State and Zip Code

sdismukes@acdyn.com

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

For further information concerning this matter, please call:

WILLIAM S. DISMUKES

Name of Person

at (**561**)

543-4150

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☒ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

FILED

SYSNET ENGINEERING, LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Page 1 of 2

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated July 6, 2009.

William S. Dismukes
Signature of a member or authorized representative of a member

WILLIAM S. DISMUKES
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

FILED
2009 JUL -9 AM 11:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA