

LD3000024278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

(Business Entity Name)

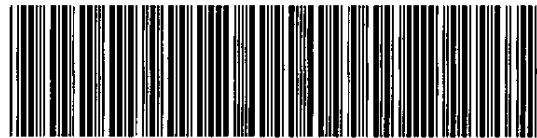
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2009 APR -1 AM 11:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS

MAR - 3 2009

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: The Tech Center, 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:

Marilyn Simmons

(Name of Person)

The Tech Center, LLC

(Firm/Company)

1426 Perez Street

(Address)

Orlando, Florida 32825

(City/State and Zip Code)

For further information concerning this matter, please call:

Marilyn Simmons

(Name of Person)

at ( 407 ) 421-2100

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 3, 2009

MARILYN SIMMONS  
THE TECH CENTER, LLC  
1426 PEREZ STREET  
ORLANDO, FL 32825

SUBJECT: THE TECH CENTER LLC  
Ref. Number: L03000024278

We have received your document for THE TECH CENTER LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please fill out the second page of the amendment, we have to have a signature of the managing member or manager.

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 009A00007325

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: The Tech Center, 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:

Marilyn Simmons  
(Name of Person)  
The TechCenter / SIMITCON  
(Firm/Company)  
1426 Perez Street  
(Address)  
Orlando, FL 32825  
(City/State and Zip Code)

For further information concerning this matter, please call:

Marilyn Simmons at 407, 421-2100  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

*paid previously*

- ☐ \$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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2009 APR -1 AM 11:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Tech Center LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 7/3/2003 and assigned  
Florida document number L03000024278.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

SIMITCON, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

1426 Perez Street

**(Principal office address MUST BE A STREET ADDRESS)**

Orlando, Florida 32825

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office 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 608, 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)

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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dated 3/31, 09

*Marilyn S. Simmons*

Signature of a member or authorized representative of a member

*Marilyn S. Simmons*

Typed or printed name of signee

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 2009 APR -1 AM 11:27  
 SECRETARY OF STATE  
 PALM BEACH, FLORIDA