

DOCUMENT# L05000025838

Entity Name: FLORIDA TECHNICAL SERVICES, LLC

New Principal Place of Business:**New Mailing Address:**

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date _____

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: M.C. DEAN, INC.,
Address: 22461 SHAW ROAD
City-St-Zip: DULLES, VA 20166

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DOUG CUMINS

V

01/08/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date