# LD500066410

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

## **COVER LETTER**

TO:	Registration Se Division of Cor		•	
SUBJE	CCT:		eshooters of Delray LLC ed Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please i	return all correspo	ndence concerning this matter	to the following:	
			Charles R. Sterbakov	
		Con	nputer Troubleshooters	
			Firm/Company	
			7127 Boscanni Dr.	
		Boy	vnton Beach, FL 33427	
			City/State and Zip Code	
		E-mail address: (t	arlie@sterbakov.com  o be used for future annual report notifica	ation)
For furt	ther information co	oncerning this matter, please ca	all:	
Charles R. Sterbakov  Name of Person			at ( 561 ) 7  Area Code & Daytime	52-4460 Felephone Number
Enclose	ed is a check for th	ne 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



June 1, 2011

CHARLES R. STERBAKOV 7127 BOSCANNI DRIVE BOYNTON BEACH, FL 33427

SUBJECT: COMPUTER TROUBLESHOOTERS OF DELRAY LLC

Ref. Number: L05000066410

We have received your document for COMPUTER TROUBLESHOOTERS OF DELRAY LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 111A00013434

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Compute	r Troublesho	oters of Del	ray LLC	711 ¥: 28	
(Name of the Limited	d Liability Compar A Florida Limited L	n <mark>y as it now appe</mark> a liability Company)	rs on our records.)	<del></del>	
The Articles of Organization for this Limited I Florida document numberL0500006		were filed on	July 6, 2005	and assigned	
This amendment is submitted to amend the fol					
A. If amending name, enter the new name o	of the limited liab	ility company he	<u>re</u> :		
Comp	outer Service P	rofessionals Ll	_C		
The new name must be distinguishable and end w 'L.L.C."	ith the words "Limi	ted Liability Comp	any," the designation "I	LC" or the abbreviation	
Enter new principal offices address, if appli	cable:	7127 Boscar	nni Dr.		
Principal office address MUST BE A STRE	ET ADDRESS)	Boynton Bea	ich, FL 33437		
			<b>16</b> . /		
Enter new mailing address, if applicable:		7127 Boscar	nni Dr.		
Mailing address MAY BE A POST OFFICE BOX)		Boynton Beach, FL 33437			
B. If amending the registered agent and registered agent and/or the new registered o			our records, <u>enter t</u>	he name of the ne	
Name of New Registered Agent:	Charles R. S	Sterbakov			
New Registered Office Address:	New Registered Office Address: 7127 Boscanni Dr.				
		Er	nter Florida street add	ress	
	Boy	nton Beach	, Florida	33437	
		City	<u> </u>	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 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 = Ma MGRM = M	nager Aanaging Member	•	
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add Remove
	·-		Add Remove
			D Damassa
			AddRemove
			Add Remove
<del></del>			
D. If amend	ding any other informatio	on, enter change(s) here: (Attach additional sheets, if	necessary.)  SECRETARY  11 JUN -9
			M 9: 28
Dated	July 1	2011	; A9
	Signat	ture of a member or authorized representative of a member Charles R. Sterbakov	
		Typed or printed name of signee	

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Filing Fee: \$25.00