

L06000018439

(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

L06-18439

(Document Number)

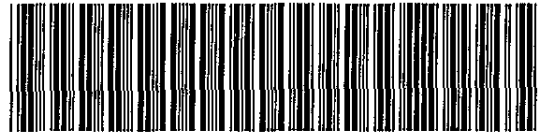
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M. HODGES

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ADVANCED COMPONENT DESIGNS, 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:

TROY SMITH  
(Name of Person)

ADVANCED COMPONENT DESIGNS, LLC  
(Firm/Company)

3250 N.E. CANDICE AVE. UNIT #86  
(Address)

JENSEN BEACH FL. 34957  
(City/State and Zip Code)

For further information concerning this matter, please call:

TROY SMITH at ( 772 ) 370-0588  
(Name of Person) (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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

ADVANCED COMPONENT DESIGNS LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on FEB. 20, 2006 and assigned document number LO6000018439.

**SECOND:** This amendment is submitted to amend the following:

I, TROY SMITH, would like to be removed completely from Advanced Component Designs, LLC. I am no longer any part of that company. Remove me from Operating Manager, Office Manager, Secretary or anything else with my name on it. I would like a receipt or confirmation that this has been handled. Thank-You

If any more information is needed, please let me know so I can rectify the problem ASAP

Dated MARCH 5, 2006.

Troy Smith

Signature of a member or authorized representative of a member

TROY SMITH

Typed or printed name of signee

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STATE OF FLORIDA  
TALLAHASSEE FILING

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