L06000078115

(R	lequestor's Name)	
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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

W 12-60872

J. BRYAN

DEC 1 9 2012

EXAMINER

COVER LETTER

TO: Registr

Registration Section
Division of Corporations

CYBERTRUST 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:

MARK G. HOLLO

Name of Person

Firm/Company

P.O. BOX 1380

Address

BOYNTON BEACH, FL 33425

City/State and Zip Code

THEFUNDLLC@GMAIL.COM

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

For further information concerning this matter, please call:

MARK G. HOLLO

_{4,}917,9299999

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

FILED
2012 DEC 18 PH 2: 3



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 7, 2012

MARK G. HOLLO P.O. BOX 1380 BOYNTON BEACH, FL 33425

SUBJECT: CYBERTRUST LLC Ref. Number: L06000078115

THE PH 2: 39
MIZDEC 18 PH 2: 39
SECRETARSEE, FLORIDA
TRECANASSEE, FLORIDA

We have received your document for CYBERTRUST LLC and your check(s) totaling \$60.00. 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) 245-6051.

Joey Bryan Regulatory Specialist II

Letter Number: 112A00029031

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

CYBERTRUST LLC

ed 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 August 8, 2006 and assigned Florida document number <u>L06000078115</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: CONCORRX LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the above "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 Zip Code City 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member			
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			7.
			7047 DECRETARY
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. If amending any other information, ent	ter change(s) here: (Attach additional sheets, if necessary.)
-	
	
DECEMBER 4	2012
ated DECLIVIDER 4	11
	Manager Manager
	a member or authorized representative of a member
MARKÆ. HOLLO	
	Typed or printed name of signee
•	Page 3 of 3

Filing Fee: \$25.00

FILED
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SECRETARY OF STATE ALLAHASSEE, FLORIDA