

L07000027031

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

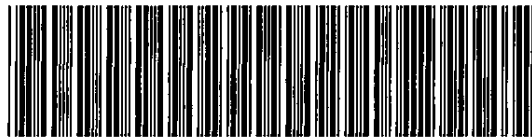
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ALTEC, 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:

EVELYN RIVERA, EA

(Name of Person)

ACCOUNTING CENTER FOR SMALL BUSINESS LLC

(Firm/Company)

5701 DOGWOOD DR

(Address)

ORLANDO, FL 32807

(City/State and Zip Code)

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For further information concerning this matter, please call:

EVELYN RIVERA, EA

(Name of Person)

at ( 407 ) 281-0227

(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**

**A & D MOTORS CONCEPTS, LLC**

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on MARCH 9, 2007 and assigned  
document number L07000027031.

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

**THE NAME OF THE LIMITED LIABILITY COMPANY IS:**

ALTEC, LLC

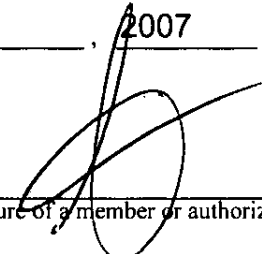
**THE NEW STREET ADDRESS OF THE PRINCIPAL OFFICE OF TH LLC IS:**

1863 TAFT VINELAND RD

ORLANDO FL 32837

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TALLAHASSEE, FLORIDA

Dated MARCH 9, 2007

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

**TOMAS DE JESUS**

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**