

L09000028804

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400211061054

08/29/11--01003--021 **60.00

FILED

2011 AUG 29 PM 3:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
AUG 30 2011
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 19, 2011

LEE HENDRIX / VIASYS TECHNOLOGY GROUP, LLC
P.O. BOX 5290
LAKELAND, FL 33807

SUBJECT: VIASYS TECHNOLOGY GROUP, LLC
Ref. Number: L09000028804

We have received your document for VIASYS TECHNOLOGY GROUP, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$30.00.

The document must be signed by a member or an authorized representative of a member.

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 911A00019501

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Viasys Technology Group, 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:

Lee Hendrix

Name of Person

Viasys Technology Group, LLC

Firm/Company

P.O. Box 5290

Address

Lakeland, FL 33807

City/State and Zip Code

lhendrix@viasyscorp.com

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

For further information concerning this matter, please call:

Lee Hendrix

Name of Person

at (863)

393-9325

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

FILED

2011 AUG 29 PM 3: 20

Viasys Technology Group, LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Name of the Limited 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 05/26/2009 and assigned
Florida document number L09000028804.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

202 Lake Miriam Drive, Suite E-7

(Principal office address MUST BE A STREET ADDRESS)

Lakeland, FL 33813

Enter new mailing address, if applicable:

P.O. Box 5290

(Mailing address MAY BE A POST OFFICE BOX)

Lakeland, FL 33807

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:

Lee Hendrix

New Registered Office Address:

202 Lake Miriam Drive, Suite E-7

Enter Florida street address

Lakeland

, Florida

33807

City

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 Changing Registered Agent, Signature of New Registered Agent

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:

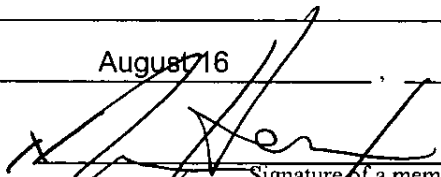
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	ANGELA OWENS	2944 DRANEFIELD ROAD LAKELAND, FL 33811	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	DAVE COOK	2944 DRANEFIELD ROAD LAKELAND, FL 33811	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	LEE HENDRIX	202 LAKE MIRIAM DRIVE, SUITE E-7 LAKELAND, FL 33813	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated August 16, 2011


x Lee Hendrix

Signature of a member or authorized representative of a member

Typed or printed name of signee

2011 AUG 29 PM 8:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED