12900066825

(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

G. MCLEOD

JAN 12 2011

EXAMINER



600190077766

01/11/11--01008--021 **25.00

11 JAN II ANII: 31
SEURETARY OF STATE
MILLANA SSEE FILANIA

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Technics In Design, LLC Name of Limited Clability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
ANDREW S. WIENER Name of Person		
Technics In Design, LLC Firm/Company		
1821 S.W. 56th Ave. Address		
Tlantation FL 33317 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
ANTIREW S. WIENER at (914) 671-7993 Name of Person Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:		
\$25 Filing Fee & Certified Copy		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608 liability company submits the following statement in or agent, or both, in the State of Florida.	_
1. Name of the limited liability company: 1ech nic	is In Design, LLC
2. (a) Principal office address of limited liability compa	iny: 1821 5.ω. 56th Ave
(Note: MUST BE STREET ADDRESS)	Plantation, F1 33317
(b) Mailing address of limited liability company:	1821 S.W. 56th Ave
(Note: MAY BE POST OFFICE BOX)	Plantation, P1 33317
3. Date of filing/registration in Florida	L0900066825 4. Document number
5. (a) Registered Agent and Registered Office shown o	•
Registered Agent:	AUDREW S. WIENER
Registered Office Address:	1821 S.W. 56+ Ave Plantation, PL \$33172
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address
NEW Registered Agent:	ANDREW S. WIENER & IT
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	7 Plantetion -FL 33317
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as oth or the operating agreement of the limited liability company.	Florida street address of the registered office entical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote terwise provided in the articles of organization
Signature of a member or authorized representative of a member	
ANDREW S. WIENER Printed or typed name of signee	<u> </u>
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my particle of the pand of th	l agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in nerely reflect a change in the registered office any has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00