

LI0000008488

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

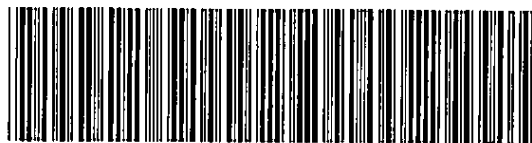
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/07/21--01013--019 **25.00

SECRETARY OF STATE
TALLAHASSEE, FL

2021 OCT 12 AM 8:39

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 21, 2021

SATISH CHINTA
8027 PRAISE DR
TAMPA, FL 33625

SUBJECT: SYNOLTA TECHNOLOGIES LLC
Ref. Number: L10000008488

We have received your document for SYNOLTA TECHNOLOGIES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

On line 5(a) has to show the current registered agent name reflected on sunbiz.org. If you are only updating the authorized person address then that requires a different form. Enclosed is the amendment form to make the changes.

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) 245-6050.

Catherine M Brumbley
Regulatory Specialist II

Letter Number: 721A00022752

RECEIVED
OCT 12 PM 2:31

²²
COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SYNOLTA TECHNOLOGIES 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:

SATISH KUMAR V CHINTA
Name of Person

SYNOLTA TECHNOLOGIES LLC
Firm/Company

8027 PRAISE DR,
Address

TAMPA, FL - 33625
City/State and Zip Code

SYNOLTA @ GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SATISH CHINTA at (813) 948-5100
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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

SYNOLTA TECHNOLOGIES LLC

(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 01/25/2010 and assigned Florida document number L10000008488.

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 contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8027 PRAISE DR

TAMPA, FL-33625

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8027 PRAISE DR

TAMPA, FL-33625

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

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 605, 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

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2010 OCT 12 AM 8:39
SECRETARY OF STATE
TAMPA, FL

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 10/8/2021

Ch. V Salt ~~4~~

Signature of a member or authorized representative of a member

SATISH KUMAR V. CHINTA

Typed or printed name of signee