

L10000118302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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06/04/13--01014--004 **25.00

FILED
13 JUN -4 AM 8:04
SEC. OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **SYSTEC, 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:

Shane E. Peachey

Name of Person

Firm/Company

1175 NW 17th Ave.

Address

Delray Beach, FL 33445

City/State and Zip Code

shane_peachey@hotmail.com

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

For further information concerning this matter, please call:

Shane E. Peachey

561 860 - 0282

Name of Person

Area Code & Daytime Telephone Number

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13 JUN -4 AM 8:04
TALLAHASSEE, FLORIDA

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

SYSTEC, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
13 JUN -4 AM 8:04
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on November 15, 2010 and assigned

Florida document number L10000118302

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:

(Principal office address MUST BE A STREET ADDRESS)

1175 NW 17th Ave.
Delray Beach, FL
33445

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1175 NW 17th Ave.
Delray Beach, FL
33445

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:

Shane Prachey

New Registered Office Address:

1175 NW 17th Ave, Delray Beach FL
Enter Florida street address 33445

_____, 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 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.

[Signature]
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:

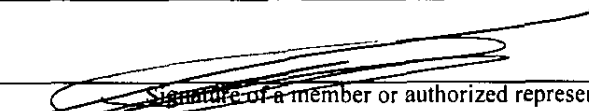
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Shane E. Peachey	1175 NW 17 th Ave.	<input checked="" type="checkbox"/> Add
		Delray Beach, FL	<input type="checkbox"/> Remove
		33445	
MGR	Jonathan P. Kross	1101 So. Rogers Circle	<input type="checkbox"/> Add
		Suite 10	<input checked="" type="checkbox"/> Remove
		Boca Raton, FL 33487	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input 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 JUNE 3rd, 2013



Signature of a member or authorized representative of a member
Shane E. Peachey

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00