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T. HAMPTON

COVER LETTER

TEFTON G. INCINTOSH Name of Person SEFTON SELECTRONICS LAC Firm/Company 3507 NW 10/K ME. Address -OAKLAND- PARK FL. 33309 City/State and Zip Code E-mail address: (to be used for future annual report notification) surther information concerning this matter, please call:	BJECT: QEP	Name of Limited Liability Company
SEFTON G. MCINTOSH Name of Person JEFTON'S ELECTRONICS LAC Firm/Company 3507 NW 10/K NB. Address OAKLAND- PARK FL. 33309 City/State and Zip Code	enclosed Articles of An	nendment and fee(s) are submitted for filing.
JEFTON'S ELECTRONICS LAC Firm/Company 3507 NW 10/K NE. Address OAKLAND- PARK FL. 33309 City/State and Zip Code E-mail address: (to be used for future annual report notification)	se return all correspond	ence concerning this matter to the following:
3507 NW 10/k AVE. Address OAKLAND- PARK FL. 33309 City/State and Zip Code E-mail address: (to be used for future annual report notification)		JEFTON G. MCINTOSH Name of Person
City/State and Zip Code E-mail address: (to be used for future annual report notification)		JEFTON'S ELECTRONICS LAC Firm/Company
E-mail address: (to be used for future annual report notification)		3507 NW 10/K AVE.
	a di	-OAKEANS- PARK FL. 33309 City/State and Zip Code
		E-mail address: (to be used for future annual report notification)
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(at (954) 701-1324 Area Code Daytime Telephone Numbe

MAILING ADDRESS:

□ \$30.00 Filing Fee &

Certificate of Status

Enclosed is a check for the following amount:

\$25.00 Filing Fee

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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

□ \$60.00 Filing Fee,

Certificate of Status & Certified Copy (additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

□ \$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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

Enter Florida street address

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager '
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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record specifies	a delayed effective date, but not an effective time, at 12	2:01 a.m. on the earlier of
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	Signature of a member or authorized representative of a member	SE SE
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Filing Fee: \$25.00