

L12000059935

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

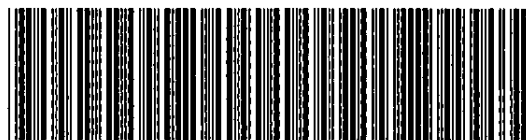
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/25/13--01007--006 **25.00

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13 FEB 11 PM 3:46
CLERK OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
FEB 12 2013



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 28, 2013

VAST TECH SUPPORT LLC
ELLIO LOEWENSTERN
2855 S CONGRESS AVE.
DELRAY BEACH, FL 33445

SUBJECT: VAST TECH SUPPORT LLC
Ref. Number: L12000059935

We have received your document for VAST TECH SUPPORT 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 913A00002051

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Vast Tech Support 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:

Elliot Loewenstern
Name of Person
Vast Tech Support
Firm/Company
2855 South Congress Ave #AB
Address
Delray Beach, FL 33445
City/State and Zip Code
accounting@vasttechsupport.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jordan Chibrick at 561 948-5915
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)

↑
already paid

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

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CLERK OF SUPREME COURT
TALLAHASSEE, FLORIDA

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

Page 1 of 3

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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated Feb 5th, 2013



Signature of a member or authorized representative of a member

Elliot Loebenstein Managing Partner

Typed or printed name of signee

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Filing Fee: \$25.00