

L12000157455

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

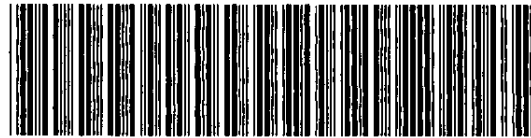
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MAR 15 2013

B. KOHR



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03/04/13--01012--010 **30.00

FILED
13 MAR 14 PM 1:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 5, 2013

JOHNATHAN ELIS
619 MADISON AVENUE
DAYTONA BEACH, FL 32114

SUBJECT: TECH PRO PLAN LLC
Ref. Number: L12000157455

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for TECH PRO PLAN LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The new name you have chosen -- TECH PROS LLC -- is not available because it is too similar to the name of an already existing company -- TECHPRO, LLC -- Doc. Number L01000001114.

Please choose another new name.

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) 245-6051.

Buck Kohr
Regulatory Specialist II

Letter Number: 013A00005258

► Fax

3/14/2013

From: Johnathan Ellis / Ref # LI2000157455

Phone: 407.409.1903

Email: contactus@techproplans.com

Company Name: Tech Pro

To: Buck Kohr, Regulatory Specialist II

Phone: 850.245.6051

Fax: 850.245.6030

Company Name: Florida Department of State Division of Corporations

Comments:

Good Day Mr. Kohr,

Please see my updated changes. If there is any issue please feel free to contact me directly.

Best regards,

Johnathan Ellis

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TALLAHASSEE, FLORIDA

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13 MAR 15 AM 6:44
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TALLAHASSEE, FLORIDA



Urgent



For Review



Please Comment



Please Reply



Please Recycle

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Tech Pro Plan 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:

Johnathan Ellis

Name of Person

Firm/Company

619 Madison Ave.

Address

Daytona Beach, Florida 32114

City/State and Zip Code

jellis2000@gmail.com

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

For further information concerning this matter, please call:

Johnathan Ellis

Name of Person

at **(407) 409-1903**

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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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13 MAR 14 PM 1:35
TALLAHASSEE, FLORIDA

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

Tech Pro Plan 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 December 18, 2012 and assigned
Florida document number L12000157455.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

#1 Tech Pros LLC

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

City, Florida 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.

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:

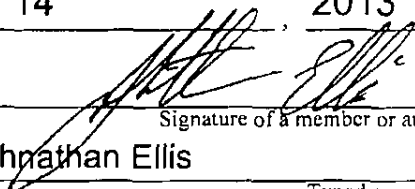
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<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 March 14, 2013


Signature of a member or authorized representative of a member

Johnathan Ellis

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00