# 14000091542

(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	(Requestor's Name)
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Address)
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(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(City/State/Zip/Phone #)
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B. BOSTICK AUG - 5 2014 **COVER LETTER** 

Registration Section
Division of Corporations

Barbina

Bastich

SUBJECT:

ACTUS Consulting & IT Services

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:

Haithem Shaheen

813.727.351

Name of Person

**ACTUS Consulting & IT Services** 

Firm/Company

8875 Hidden River Pkwy. - Suit 300

Address

Tampa, Florida 33637

City/State and Zip Code

hshaheen@actuspartners.com

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

For further information concerning this matter, please call: 4

Ross Lavin

Name of Person

813.727.3511

561 641-5440

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

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

any as it now appears on our records.) Liability Company)
y were filed on 06/06/2014 and assigned
bility company here:
bility Company," the designation "LLC" or the abbreviation "L.L.C."
8875 Hidden River Pkwy.
Suit 300
Tampa, Florida 33637
8875 Hidden River Pkwy.
Tampa, Florida 33637
office address on our records, enter the name of the re:  Enter Florida street address
. Florida
City Zip Code
<u>t</u>

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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member Title Title <u>Name</u> **Address Type of Action** 19310 Autumn woods Ave. ■ Add Haithem Shaheen MGR Tampa, Florida 33647 ☐ Remove □ Add □ Add □ Remove TO Demove □ Add \_□ Remove

). If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Please update Amr Masoud Name to match the following
	First Name: "AMR"
	Last Name: "ADEL HAMID SOLIEMAN MASOUD"
	ective date, if other than the date of filing:
Dat	July 20th 2014
Dai	
	Signature of a member or authorized representative of a member
	Haithem Shaheen Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2014 AUG - U P 12: U1

ACCRETARY OF STATE
CLICKHASSES FLORIDA



## FLORIDA DEPARTMENT OF STATE Division of Corporations

July 17, 2014

HAITHEM SHAHEEN 19310 AUTUMN WOODS AVENUE TAMPA, FL 33467

SUBJECT: ACTUS CONSULTING & IT SERVICES LLC

Ref. Number: L14000091542



We have received your document for ACTUS CONSULTING & IT SERVICES 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):

I have enclosed the missing page 1 to be completed and returned.

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.

Barbara Bostick Regulatory Specialist II

Letter Number: 114A00015390