

214000113521

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

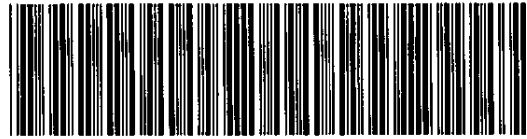
(Business Entity Name)

(Document Number)

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JULIA A. SIE FLORES

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AUG 19 2014
D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Voltrea, 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:

Alexander E. Nikesch

Name of Person

Voltrea, LLC

Firm/Company

8891 Brighton Lane, Suite 104

Address

Bonita Springs, FL 34135

City/State and Zip Code

alex@voltrea.com

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

For further information concerning this matter, please call:

Alexander E. Nikesch

Name of Person

at **312 404-7333**

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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Voltrea, LLC

The Articles of Organization for this Limited Liability Company were filed on July 18, 2014 and assigned
Florida document number L14000113521

Page 1 of 3

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Alexander Edward Nikesch	8891 Brighton Lane, Suite 104	<input checked="" type="checkbox"/> Add
		Bonita Springs, FL 34135	<input type="checkbox"/> Remove
			<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.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated August 11

2014

Jinghua Lu

Signature of a member or authorized representative of a member

Jinghua Lu

Typed or printed name of signee

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Filing Fee: \$25.00

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CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
MIAMI-DADE COUNTY
FLORIDA