LI4000160480				
(Requestor's Name) (Address) (Address)	300277590723			
(City/State/Zip/Phone #)	10/05/1501005004 <b>**</b> 35.00			
Certified Copies Certificates of Status Special Instructions to Filing Officer: WORS form				
Office Use Only	FILED 2016 FEB 16 P 5: 03 ECRETARY OF STATE AllASSEE, FLORIDA			
	FEB 1 7 2016 <b>S MASON</b>			

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 8, 2015

MIKE RUSSO 7850 NW 146 STREET, SUITE 510 MIAMI LAKES, FL 33016

SUBJECT: 3DSYSTECH, LLC Ref. Number: L14000160480

We have received your document for 3DSYSTECH, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

You may comply with this request via fax. Please fax correction(s) to the attention of the undersigned examiner at 850-245-6030.

Please return 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.

Stacey M Mason Regulatory Specialist II

Letter Number: 815A00021361

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee Florida 32314

## **COVER LETTER**

TO: Registration Section Division of Corporations

SUBJECT: \_\_\_\_\_

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and feets) are submitted for filing.

Please return all correspondence concerning this matter to the following:

## MIKE RUSSO

Name of Person

3DSYSTECH, LLC

Firm/Company

6836 Stirling Rd

Address

Hollywood, FL 33024

City/State and Zip Code

mike@3dsystech.com

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

For further information concerning this matter, please call:

MAYER RUSSO	305 798-1107
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the following	; amount:
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy

INHS18 (2/14)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

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ame of the limited liability company:				
	*(b)			
Principal office address of limited liability company ( <u>Note: MUST BE STREET ADDRESS</u> )		-	• • •	
6836 Stirling Rd		6836 Stirling Rd		
Davie, FL 33024	Davie FL 33024			
10/14/2014	, L	14000160480	•	
Date of filing/registration in Florida	4.	Document number		
CORPORATION SERVICE COMPANY				
	the Florida I	Dept. of State		
CORPORATION SERVICE COMPANY				
Registered Office Address (MUST BF. FLORID A STREET -	(DDRESS)	9 79 88		
1201 HAYS STREET				
TALLAHASSEE	32301			
	()(7 ) )	SSE	1	
Fater name of <u>NJW Registered Agent</u> and or <u>NLW Registered</u>	Unice autie		m	
JACOB RUSSO				
NEW Registered Office Address:				
6836 Stirling Rd				
Davie, FL	33024			
ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the mane of a member or authorized representative of a member thy accept the appointment as registered agent and agr	the registe ability con of the limit dimited lia <u>MAY</u> wee to act is	ered office and the business office upany, it is hereby confirmed that the ed liability company or as otherwing bility company. ER RUSSO Printed or typed name of sign in this capacity. I further agree to	of the registered he change(s) se provided in nee	
	Principal office address of finned liability company ( <i>Sole: MUST BE STREET ADDRESS</i> ) 6836 Stirling Rd Davie, FL 33024 10/14/2014 Date of filing/registration in Florida CORPORATION SERVICE COMPANY Registered Agent and Registered Office shown on the records of CORPORATION SERVICE COMPANY Registered Office Address <i>(MUST BE FLORIDA STREET</i> ) 1201 HAYS STREET TALLAHASSEE FIL Finter name of <u>NIW Registered Agent</u> and or <u>NEW Registered</u> JACOB RUSSO <u>NEW</u> Registered Office Address: 6836 Stirling Rd Davie . FIL imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lie ere authorized by an affirmative vote of the members of icles of organization of the operating agreement of the <i>Muse of a member or authorized representative of a member</i>	anne of the finited flability company: (b)   Principal office address of finited flability company: (b)   (Ster: MUST BE STREET ADDRESS) 6836 Stirling Rd   Davie, FL 33024 (b)   10/14/2014 (c)   Date of filing/registration in Florida 4.   CORPORATION SERVICE COMPANY (c)   Registered Agent and Registered Office shown on the records of the Florida I   CORPORATION SERVICE COMPANY   Registered Office Address (MUST BE FLORIDA STREET ADDRESS)   1201 HAYS STREET   TALLAHASSEE (FL 32301)   Enter name of STW Registered Agent and or NEW Registered Office address   6836 Stirling Rd   Davie (FL 33024)   inited flability company is not organized under the laws of the Same or changes are made, the Florida street address of the registered will be identical. Or, in the case of a Florida limited liability company is not organized under the laws of the same or changes are made, the Florida street address of the registeriation or the operating agreement of the limited liability company is not organized under the laws of the Same or changes are made, the Florida street address of the registeriation or the operating agreement of the limited liability company is not organized under the limited liability company is not organized under the limited liability company is not organized under the limited liability company is not organized address of the registered of the street address of th	Principal office address of linued iability company: (Mee: MUST RE STREET ADDRESS) Yuafing address of linued liab (Succ. MAY RE POST OF 6836 Stirling Rd   Davie, FL 33024 Davie FL 33024   10/14/2014 L14000160480   Date of filing/registration in Florida 4.   CORPORATION SERVICE COMPANY   Registered Agent and Registered Office shown on the records of the Florida Dept. of State:   CORPORATION SERVICE COMPANY   Registered Office Address   MUST RE TILIORIDA STREET   1201 HAYS STREET   TALLAHASSEE   FL   JACOB RUSSO   YEW Registered Office Address:   Must Rd   Davie   FL   Jacoba RUSSO   YEW Registered Office Address:   Must Registered Office Address:   Must Registered Office Address:   JACOB RUSSO   YEW Registered Office Address:   Basie   Basie   Davie   FL   State of Florida, it is hereby conting and or SLW Registered office and the business of the registered office and the business of the registered office and the business office and the business of the registered office and the business of the registered office and the business of the registered office and the business of the	

Signature of Registered Agent

Division of Corporations® P.O. Box 6327® Tallahassee, FL 32314 FILING FEE: \$25.00

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