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(Requestor's Name)				
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(Business Entity Name)				
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D. SCOTT DEC 6 2016

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## TO: Registration Section Division of Corporations

SUBJECT: TECHTROS LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

### SAUL MISHKIN

Name of Person

TECHTROS LLC

Firm/Company

#### 3922 PEMBROKE RD

Address

## PEMBROKE PARK FL 33021

City/State and Zip Code

## SAUL@NEX-XOS.COM

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

For further information concerning this matter, please call:

SAUL MISHKIN	at (954 ) 3170576	<b>9</b> ()						
Name of Person		3 23						
STREET/COURIER ADDRESS:	MAILING ADDRESS:	ζų) L						
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 follow	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.

1. Na	me of the limited liability company: TECHTROS L	.LC		
	3922 PEMBROKE RD	(	(b) 3922 PEMBROKE RD	
L. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `		failing address of limited liability company:   (Note: MAY BE POST OFFICE BOX)
	PEMBROKE PARK FL 33021		PEMBRO	DKE PARK FL 33021
		_		
	11/20/2015		L1500019	6562
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	SAUL MISHKIN			
	Registered Agent and Registered Office shown on the records of the 1922 TIGERTAIL BLVD	he Flori	da Dept. of State	:
	Registered Office Address (MUST BE FLORIDA STREET A BLDG 12	DDRES	<u>55)</u>	
•	DANIA BEACH	33004	1	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>		<u>auress</u> :	E -5
	NEW Registered Office Address:			SEE H
	PEMBROKE PARK	3302 <sup>.</sup>	1	TATE 3
the cha agent v was/we	imited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members o cles of organization of the operating agreement of the	the reg bility of f the li limited	gistered office company, it is mited liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
Signa	ure of a member or authorized representative of a member			Printed or typed name of signee
provisi the obl to mero notified	by accept the appointment as registered agent and agro ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I h in writing of this thanged for of Registered Agent	ze to a perfori l for in ereby	ct in this capa mance of my a Chapter 605, confirm that t	acity. I further agree to comply with the huties, and I am familiar with and accept , F.S. Or, if this document is being filed he limited liability company has been
	Division of Corporations• P.O. B	lox 63:	27• Tallahas	see, FL 32314

FILING FEE: \$25.00

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