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| Special Instructions to Filing Officer: |
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FILING CANCELLED DUE TO ARTICLES OF ORGANIZATION BEING CANCELLED DUE TO RETURNED CHECK.

SECRETARY OF STAIL

FILED

D. BRUCE. MAY 31 2017

COVER LETTER

| TO: Registration Division of C | | | | | |
|--------------------------------|---|---|--------------------------|--|-------|
| SUBJECT: | Miami Electro Name of Lim | onics Recycling ited Liability Company | Company. | 140 | |
| The enclosed Articles of | of Amendment and fee(s) are sub | mitted for filing. | | | |
| Please return all corresp | pondence concerning this matter | to the following: | | | |
| | 57 | Campbell Name of Person | | | |
| | 1717 1 | Firm/Company V. Bnyshore D(| #1044 | | |
| | Miami, F | Address L 33137 City/State and Zip Code | | z | |
| Part Carbonia Company | · | o be used for future annual report notif | lication) | 2021 MAY 31 SECRETARY (ALLAHASSEE | |
| 25 | concerning this matter, please ca | at (865) 713: | 7943 Telephone Number | 31 P 4: 28 RY OF STATE SEE. FLORIDA | FILED |
| 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) | Certified C | of Status & | |

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 17, 2017

RANDALL CAMPBELL 1717 N BAYSHORE DRIVE #1044 MIAMI, FL 33132

SUBJECT: MIAMI ELECTRONICS RECYCLING COMPANY, LLC

Ref. Number: L17000008596

We have received your document for MIAMI ELECTRONICS RECYCLING COMPANY, 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):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Deborah Bruce Regulatory Specialist II

Letter Number: 817A00009851

SECRETARY OF STATE

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Miama Electronics | Reading Company LLC | |
|--|---|------------|
| (Name of the Limited Liability Compar (A Florida Limited L | ny as <u>it nòw appears on our records.</u> | |
| The Articles of Organization for this Limited Liability Company Florida document number | were filed on or \\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liabil | lity company here: | |
| The new name must be distinguishable and contain the words "Limited Liabili | ty Company," the designation "LLC" or the abbreviation "L.L.C." | - |
| Enter new principal offices address, if applicable: | 1717 N. Bryshore Dr | |
| (Principal office address MUST BE A STREET ADDRESS) | #1044 Miam: FL 33132 | - |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 17-17 N. Bayshole Or 1044 Mami, FL 331317 | |
| B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here | | <u>iev</u> |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida street address | |
| | Emer 1 totale street dadress | |
| | , Florida | |

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 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: MGR = Manager AMBR = Authorized Member <u>Title</u> <u>Name</u> **Address** Type of Action OKane, Randall J 843 Harvest Moon Dr. DAdd ☐ Change Stewart, Sandra L ☐ Change ☐ Add ☐ Remove _□ Change _□ Add Remove Remove ☐ Change □ Add

☐ Remove

☐ Change

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Filing Fee: \$25.00