

L17000100176

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

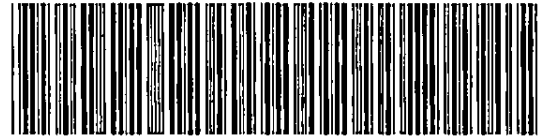
(Document Number)

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2017 OCT 16 P 4:30  
TALLAHASSEE, FLORIDA

FILED

D SCOTT  
OCT 17 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 4, 2017

PRESTIGE ACCOUNTING & BOOKKEEPING INC  
HELEN WADDELL  
7134 W MCNAB RD.  
TAMARAC, FL 33321

SUBJECT: CERUS TECHNOLOGIES LLC  
Ref. Number: L17000100176

We have received your document for CERUS TECHNOLOGIES LLC and your check(s) totaling \$43.75. 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, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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.

Karen A Saly  
Regulatory Specialist II

Letter Number: 117A00020057

2017 OCT 16 PM 12:18

ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED

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OCT 15 PM 4:30

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# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** CERUS TECHNOLOGIES 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:

HELEN WADDELL  
Name of Person  
PRESTIGE ACCOUNTING & BOOKKEEPING INC  
Firm/Company  
7134 W MCNAB RD  
Address  
TAMARAC, FL 33321  
City/State and Zip Code  
prestigeacct@comcast.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

HELEN WADDELL at (954) 653-8015  
Name of Person 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

RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL  
JUN 13 2007

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

CERUS TECHNOLOGIES LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 5/5/2017 and assigned Florida document number L17000100176.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

7134 W MCNAB RD

**(Principal office address MUST BE A STREET ADDRESS)**

TAMARAC, FL 33321

Enter new mailing address, if applicable:

7134 W MCNAB RD

**(Mailing address MAY BE A POST OFFICE BOX)**

TAMARAC, FL 33321

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida street address

Florida

City

Zip Code

**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>	<u>Address</u>	<u>Type of Action</u>
MGR	MICHAEL RAIA		<input type="checkbox"/> Add
		425 N FEDERAL HWY, HALLANDALE BEACH, FL 33009	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

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OCT 16 11:39 AM  
STATE OF MISSISSIPPI

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

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated October 10, 2017

Signature of a member or authorized representative of a member

Helen Waddell

Typed or printed name of signee