

L18000194652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

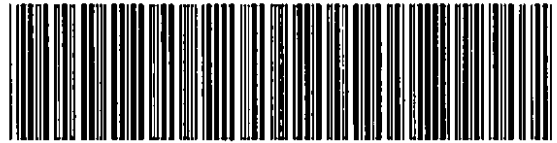
(Document Number)

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OFFICE OF CLERK OF STATE  
20 MAY -1 AM 10:13

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MAY 08 2020

D CUSHING

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ITECK DIGITAL 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:

Peter Martin  
Name of Person

CACTUS sky communication  
Firm/Company

14320 Jarrettsville Pike  
Address

Phoenix MD 21131  
City/State and Zip Code

Peter@Cactusky.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Peter Martin at (410) 296-2343  
Name of Person Area Code & Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

2018-1 APR 13

OFFICE OF STATE  
CORPORATIONS



2020 JAN -1 AM 9:00

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 14, 2020

PETER MARTIN  
DTECK DIGITAL LLC  
3232 NE 4TH STREET  
POMPANO BEACH, FL 33062

SUBJECT: DTECK DIGITAL LLC  
Ref. Number: L18000194652

We have received your document for DTECK DIGITAL 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, but your entity is a Limited Liability Company. 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) 245-6050.

Diane Cushing  
Senior Section Administrator

Letter Number: 320A00001030

**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. Name of the limited liability company: DTECK DIGITAL, LLC

2. (a) Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)

3232 NE 4th Street  
Pompano Beach FL 33062

(b) Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)

14320 J. A. Robertsville Pk  
Phoenix MD 21131

3. Date of filing/registration in Florida 9/14/2018 4. Document number L1800194652

5. (a) Registered Agent Legal Service  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

155 Office Plaza Drive  
Suit A Tallahassee FL 32301

(b) Pete Martin  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

3232 NE 4th Street  
**NEW Registered Office Address:**  
Pompano Beach  
FL 33062

2018-1 AM10:13  
DEPT. OF STATE  
CORPORATIONS

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Martin  
Signature of a member or authorized representative of a member

MARY MARTIN  
Printed or typed name of signer

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.

[Signature]  
Signature of Registered Agent