

LIB000253091

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

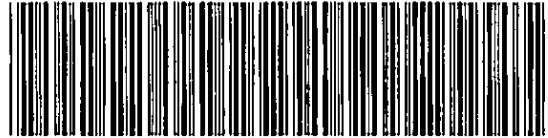
(Business Entity Name)

(Document Number)

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State of Florida
TALLAHASSEE

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SCHROEDER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FIREPHOENIX TECHNOLOGY 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:

Hong Hong

Name of Person

FIREPHOENIX TECHNOLOGY LLC

Firm/Company

3136 EGRETS LANDING DRIVE

Address

LAKE MARY, FL 32746

City/State and Zip Code

SHEILAHONG2000@YAHOO.COM

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

For further information concerning this matter, please call:

HONG HONG

407
at ()

6183706

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

FIREPHOENIX TECHNOLOGY LLC

Page 1 of 3

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>
AMBR	ULAS BAGCI	5472 WHITE HERON PL. OVIEDO, FL 32765	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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

18 NOV 16 PM 4:53
STC 01-1
OFFICE OF THE ATTORNEY GENERAL
STATE OF NEW YORK

②

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F. 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 13 November, 2018

Signature of a member or authorized representative of a member

PLAS BACI

Typed or printed name of signee