## MD8000002213

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

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**EXAMINER** 

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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: TTECH FLORIDA LLC	·····	
(Name of Limit	ed Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Cl	nange and fee(s) are submitted for filing.	
Please return all correspondence concerning this mat	tter to the following:	
EDWARD ALEXANDER		
(Name of Person)		
TTECH FLORIDA LLC		
(Firm/Company)		
1500 WESTON ROAD, SUITE 200	• •	
(Address)	<del> </del>	
WESTON, FL 33326		
(City/State and Zip Code)		
For further information concerning this matter, pleas	e call:	
EDWARD ALEXANDER at (_8	76) 878-2894	
(Name of Person) (A	Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
✓ \$25 Filing Fee	\$55 Filing Fee & Certified Copy	

INHS18 (5/08)

## \$TATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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: TTECH FL	ORIDA LLC	
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	ny: 1500 WESTON ROA WESTON, FL 33326	ND. SUITE 200
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1500 WESTON ROA WESTON, FL 33326	AD. SUITE 200
\$ _10/10/2008/	<u> </u>	
05/09/2008  3. Date of filing/registration in Florida	M08000002213 4. Document number	r
5. (a) Registered Agent and Registered Office shown o	n the records of the Flo	rida Dept. of State:
Registered Agent:	EDWARD ALEXANDER	
Registered Office Address:	1600 HARBOURSIDE DRIVE WESTON, FL 33326	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office	address:
NEW Registered Agent:	EDWARD ALEXANDER	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1500 WESTON ROAD, SUITE 200	
PACCE BE I BORROTT STREET TROUBLES	WESTON	,FL_33326
If the limited liability company is not organized under the that after the change or changes are made, the Florida stroffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company.  (Signature of a member of authorized representative of a member)	eet address of the regist case of a Florida limite	tered office and the business ed liability company, it is
EDWARD ALEXANDER (Printed or typed name of signee)	<del></del>	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pam familiar with and accept the obligations of my positions. Or, if this document is being filed to merely reflect confirm that the limited liability company has been notificated.	lagree to act in this cap proper and complete pe on as registered agent a a change in the register ded in writing of this cha	ange.
(Signature of Registered Agent)		8 OCT
Division of Corporations, P.O. Be FILING FE		FL 32314
INHS18 (05/08)		<b>=</b> = <b>= = = = = = = = =</b>

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