

M130000003758

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

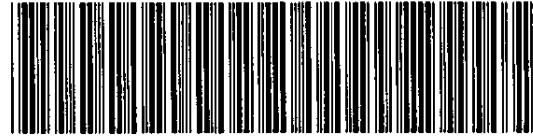
(Business Entity Name)

(Document Number)

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2013 JUL 29 PM 2:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 30 2013  
J. BRYAN

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RETEL Engineering, LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Gould

Name of Person

RETEL Engineering, LLC

Firm/Company

5871 Glenridge Drive, Suite 110

Address

Sandy Springs, GA 30328

City/State and Zip Code

michael@retelengineering.com

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

For further information concerning this matter, please call:

Michael Gould

at ( 770 ) 617-2958

Name of Person

Area Code and 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

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

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**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY  
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: RETEL Engineering, LLC

2. This entity was formed under the laws of: Georgia

3. This entity was authorized to transact business in Florida on June 13, 2013  
and its Florida document/registration number is M13000003758

4. The name and address of each manager or managing member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Michael Gould

5871 Glenridge Drive, Suite 110

Sandy Springs, GA 30328

MGRM

Kathy Kelly-Jacobs

5871 Glenridge Drive, Suite 110

Sandy Springs, GA 30328

MGRM

Will Jacobs

5871 Glenridge Drive, Suite 110

Sandy Springs, GA 30328

MGRM

Kevin M. Davenport, P.E.

245 River Plantation Road S

Saint Augustine, FL 32092

Required Signature: \_\_\_\_\_

Signature of Manager, Managing Member or Member

Filing Fee: \$25

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