

M18000004014

(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:

Office Use Only



100325771561

APPROVED
AND
FILED

2019 MAR 11 PM 12:04

SECRETARY OF STATE
TALLAHASSEE, FL 32301

19 MAR 11 PM 4:16

T.G.
03/12/19

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 675313 7930320

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : March 7, 2019

ORDER TIME : 3:12 PM

ORDER NO. : 675313-001

CUSTOMER NO: 7930320

FOREIGN FILINGS

NAME: FLASH TECHNOLOGY GROUP LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER: _____

APPROVED
AND
FILED
2019 MAR 11 PM 12:04
SECRETARY OF STATE
TALLAHASSEE, FL 32301

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

APPROVED
AND
FILED
2019 MAR 16 PM 12:04
SECRETARY OF STATE
TALLAHASSEE, FL 32399

2019 MAR 11 PM 12:04
SECRETARY OF STATE
FALL ASSESSMENT

APPROVED
AND
FILED
2019 MAR 11 PM 12:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Dated March 8, 2019.

Helen Hazelton

Signature of a member or authorized representative of a member

Helen Hazelton

Typed or printed name of signee