L0500051047

(Requestor's Name)
(Address)
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COVER LETTER

Division of Corpor			
suвјест: <u>S po</u>	Mame of Limite	nsultants LL(d Liability Company	
The enclosed Articles of Am	endment and fee(s) are subm	nitted for filing.	
Please return all corresponde	ence concerning this matter to	o the following:	
-	Sidney	Spafford Name of Person	
-	Spactor S/U	Firm/Company Agance	J
-	505 Canto	Address Lone	
-	Kissimme	e FLorida 34 City/State and Zip Code	-74/
-	Spaffordo E-mail address: (to	be used for future annual report notification	on)
For further information conc	erning this matter, please cal	1:	
Sidney Name of Pe	Spa Hord	at (407) 932-32 Area Code & Daytime Te	19 dephone Number
Enclosed is a check for the f	ollowing 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



April 3, 2013

SIDNEY SPAFFORD 505 CANTERBURY LANE KISSIMMEE, FL 34741

SUBJECT: SPAFFORD CONSULTANTS, LLC

Ref. Number: L05000056047

We have received your document for SPAFFORD CONSULTANTS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." Please amend your document accordingly.

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) 245-6051.

Leslie Sellers Regulatory Specialist II

Letter Number: 113A00007899

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Consultants LCC iability Company as it now appears on our records.) lorida Limited Liability Company)
The Articles of Organization for this Limited Lial	constraints bility Company were filed on $\frac{5}{27/3005}$ and assigned
Florida document number <u>4050000</u>	
This amendment is submitted to amend the follow	ving:
A. If amending name, enter the new name of t	he limited liability company here:
The new name must be distinguishable and end with "L.L.C."	the words "Limited Libbility Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applical	ole:
(Principal office address MUST BE A STREET	ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Be	<u>0x)</u>
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the new ce address here:
Name of New Registered Agent:	Sidney Spaffor De 3
New Registered Office Address:	
	Enter Florida street address ω
	, Florida
New Registered Agent's Signature, if changing Re	City Sistered Agent:
The state of the s	

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 608, 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MG-R	Adam L. Spa Flord	505 Canterbury Lane	Add
remove	as mar but as member	Kissimmee, FL. 34741	Remove
MGR	Sidney G. Spafford	505 Canter bury Lane	× Add
		Kissimmee FL 34741	
			Add
			Remove
			Add
			Remove
			_
			Remove
			Add
			Remove

Signature of a member or authorized representative of a member

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Filing Fee: \$25.00