LO6000 123/47

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S. HAWKES
FEB 1 0 2010
EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: Gobelman, Love, Gavin, Wasilenko & Broughan, 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:
Helen K. Westbrook
Name of Person
Gobelman, Love, Gavin, Wasilenko & Broughan, LLC Firm/Company
815 South Main Street, Suite 300 Address
Jacksonville, FL 32207
City/State and Zip Code
hwestbrook@gobelman.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Helen K. Westbrook at (904) 393-9007
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 \$Certificate of Status \$Certified Copy (additional copy is enclosed) \$Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

ARTICL	ES OF AMENDME	NT	
•	TO		10 A
ARTICLE	S OF ORGANIZAT	ران TION	120 M
	OF	(47)	
	~	, برخ	Maria Par
Gobelman, Love, Gavin, Was		LLC	10 PHE
(Name of the Limited Liabili (A Florid	ity Company as it now appe a Limited Liability Company	ars on our records.)	FORTS .
The Articles of Organization for this Limited Liability	Company were filed on	12/28/2006	and assigned
Florida document number L06000123147	<u></u> .		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company h	ere:	
Gobelman, Love, Gavin & Wasilenko, I	LLC		
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Com	pany," the designation '	LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADI	DRESS)		
Enternant mailing address if anniversity			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
			
B. If amending the registered agent and/or reg		our records, enter	the name of the new
registered agent and/or the new registered office ad	idress here:		
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:	•		
11011 11001100 011100 110011000	<u> </u>	Enter Florida street aa	dress
		<i>7</i> 01 · · ·	
	City	, Florida	Zip Code
	City.		zip cone

New Registered Agent's Signature, if changing Registered Agent:

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>	<u>Name</u>	Address	Type of Action
MGRM	Crystal T. Broughan	9023 Timberlin Lake Road	Add
		Jacksonville, FL 32256	Remove
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		7	Add Amove
			- 800 Z
			_□ Add U
			Remove
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			∏Add
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D. Haman	ding any other information, enter ch	nange(s) here: (Attach additional sheets, if necessary.)	
D. II atticii	uning any other information, enter ch	range(s) nere: (Anach adamonal sheets, y necessary.)	

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Datedf	EBRUARY & J.	2010.	
	1/0/	/ / / / / / / /	
	Horal	A. Wholeh	
	/ Signature of a me	mber or authorized representative of a member	
	Ronald S.	Wasilenko yped or printed name of signee	
	1,	yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00