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SECRETARY OF STATE

D. BRUCE

AUG 25 2009

EXAMINER

COVER LETTER

	istration S ision of Co	ection rporations			
SUBJECT:		Keasler	Law Group, LLC		
,			ited Liability Company	,	
•					
The enclosed	Articles of	f Amendment and fee(s) are su	bmitted for filing.		
Please return	all corresp	ondence concerning this matte	r to the following:		
		Fra	ank R. Keasler, Jr., Esq.		_
			Name of Person	•	
		Keasler Law Se	rvices, LLC d/b/a Keasle	er Law Group	_
			Firm/Company	•	_
		10245 Cen	turion Parkway North, S	uite 305	
			Address		OS TALL
		Jac	cksonville, Florida 32256	3	AH.
			TAR ASSI		
		F-mail address:	easler@keaslerlaw.com (to be used for future annual report	notification)	45 P
For further in	ıformation	concerning this matter, please		,	PH 1: IL
	Fran	k R. Keasler, Jr.	at (_904)	339-0255	~~ 0
	Name	of Person	Area Code & Da	aytime Telephone Numb	er
Enclosed is a	check for	the following amount:			
₽\$25.00 Fi	ling Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	losed) Certifie	iling Fee, eate of Status & ed Copy onal copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registration S Division of Co Clifton Buildi	orporations ng ve Center Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Keasler Keasler	Law Group, LLC	;	
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now app imited Liability Company	ears on our records.)	
The Articles of Organization for this Limited Liability Co	ompany were filed on _	February 5, 2008	and assigned
Florida document numberL08000012723	_		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ted liability company l	<u>iere</u> :	
	aw Group, LLC		
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Con	npany," the designation "LI	.C" or the abbreviation
Enter new principal offices address, if applicable:			-
(Principal office address MUST BE A STREET ADDR	ESS)		Z 0
			19 A
			TAN ASS
Enter new mailing address, if applicable:			Mar to 1
(Mailing address MAY BE A POST OFFICE BOX)			7 3 II
			5m 0
B. If amending the registered agent and/or regist registered agent and/or the new registered office add		n our records, <u>enter th</u>	e name of the nev
			
Name of New Registered Agent:	<u> </u>		/#
New Registered Office Address:			
New Registered Critico Address.	-	Enter Florida street addr	ess
		. Florida	
	City		Zip Code
N. D. L. B. A 49 Cl 44 Cl 15 ch in D 144 ch.	5 A		

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 = N	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Remove
			Add Remove
			Add Remove
			Add Remove
1 			Add Remove
			Add Remove
D. If amen	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	O9 AL
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_			Ti Io
Dated	August 20 , 2	2009	_
	Signature of a member	er or authorized representative of a member	
		k R. Keasler, Jr., Esq. Momber	
	Туре	ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00