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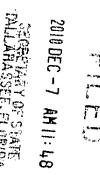
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J. SAULSBERRY EXAMINER

DEC 8 2010

COVER LETTER

TO: Registration Division of C					
SUBJECT:	Miller, Hes	ster & Eisele, P.L.			
	Name of Lim	ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are sul	bmitted for filing.			
Please return all corres	pondence concerning this matte	r to the following:			
		J. Gary Miller, Esq.			
		Name of Person			
Miller, Etzler &		r, Etzler & Maloney, P.L.			
		Firm/Company			
	429 Sc	429 South Keller Road, Suite 310			
	<u> </u>	Address			
	C	Prlando, Florida 32810		201 PAS	
		City/State and Zip Code			
		ary@millerhester.com to be used for future annual report notificat	-		G.Chapleron
		·	ion)		
For further information	concerning this matter, please of	cali:			
J. G	Bary Miller, Esq.	at (_407_)47	8-7950	2010 DEC -7 AH II: 48 SCORETARY OF STATE ALLAHASSEE. FLORIER	
Name	of Person	at (407) 47 Area Code & Daytime To	elephone Number	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MILLE	R, HESTER & EISELE,	P.L		
(<u>Name of the Limited</u> (A	Liability Company as it now appear Florida Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Lia Florida document number		July 13, 2009	and assigne	ď
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liability company her	<u>·e</u> :		
MILLE	R, ETZLER & MALONEY, P.	L.		
The new name must be distinguishable and end with L.L.C."	the words "Limited Liability Compa	iny," the designation "L	LC" or the abbre	viation
Enter new principal offices address, if applica	ible:			
Principal office address MUST BE A STREE	T ADDRESS)		<u> </u>	
			ODEC -	
Enter new mailing address, if applicable:			第二	
Mailing address MAY BE A POST OFFICE L	<u></u>			
3. If amending the registered agent and/o registered agent and/or the new registered off		our records, <u>enter tl</u>	to the name of the	e new
Name of New Registered Agent:	J. GARY MILLER, ESQ.			
New Registered Office Address:	429 South Keller Road, Suite 310			
	En	ter Florida street addr	ess	
	Orlando	, Florida	32810	
New Registered Agent's Signature, if changing R	City egistered Agent:		Zip Code	
hereby accept the appointment as registered he provisions of all statutes relative to the pr accept the obligations of my position as regis being filed to merely reflect a change in the re company has been notified in writing of this c	d agent and agree to act in this co oper and complete performance tered agent as provided for in Cl egistered office address, Ihareby	of my duties, and I a napter 608, F.S. Or, i confirm that the lim	m familiar with if this documen ited liability	h and

Page 1 of 2

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 Type of Action <u>Title</u> <u>Name</u> **Address MGRM** D. BRADLEY HESTER 429 South Keller Road ☐ Add Remove Suite 310 Orlando, Florida 32810 SHERRY L. EISELE MGRM ☐ Add 429 South Keller Road ✓ Remove Suite 310 Orlando, Florida 32810 ☐ Add Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) December 6 2010 Dated_ Signature of a member or authorized representative of a member J. GARY MILLER

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00