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SECRETARY OF STATE
ALLAHASSEE, FIRBIN.

T. HAMPTON

SEP 1 8 2011

EXAMINER

## COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: APTUS PLANE OF Limit	anning LLC  ed Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Stephen JAMESON Name of Person	·····	
APTUS Plauning Firm/Company	LLC	
2202 N. West Shore BLVD #200		
Tampa, FL 33607 City/State and Zip Code		
Stephen @ Aptusplanning. Com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Stephen Jameson at (	(813 ) 399-306 Z Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following an	nount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

11 SEP 12 PH 2: 38 Name of the Limited Liability Company as it now appears on our records ALLAHASSEE. FLORIDA

(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on \_\_\_ Florida document number \_\_ L 110000 5 0 330. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: ZZOZ N. West Shore BLUD # ZOO

Enter Florida street address Name of New Registered Agent: New Registered Office Address: , Florida 33 60-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

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 Title Address** <u>Name</u> ☐ Remove Add Remove ∏Add Remove  $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 9 Synature of a member or authorized representative of a member TAMES QUAY
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00