

L 13000001746

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

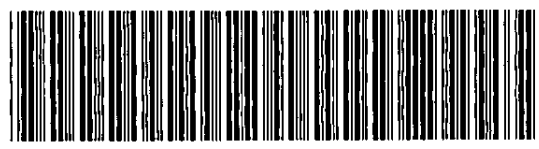
(Business Entity Name)

(Document Number)

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FILED
13 AUG 23 PM 3:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
AUG 26 2013



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 25, 2013

CATER FINANCIAL SERVICES, LLC
GABRIELLE CATER OR KEN GALLIMORE
990 N WOODLAND BLVD, STE. 306
DELAND, FL 32720

SUBJECT: CATER FINANCIAL SERVICES, LLC
Ref. Number: L13000001746

We have received your document for CATER FINANCIAL SERVICES, 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 registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 613A00015869

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Cater Financial Services, 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:

Gabrielle Cater or Ken Gallimore

Name of Person

Cater Financial Services, LLC

Firm/Company

990 N. Woodland Blvd. - Suite 306

Address

Deland, Florida 32720

City/State and Zip Code

processing.cna@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gabrielle Cater

Name of Person

at (**386**) **951-6653**

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 & 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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED
13 AUG 23 PM 3:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Cater Financial Services, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/04/2013 and assigned Florida document number L13000001746.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

A.S.K. Our Assistants, LLC

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)

990 N Woodland Blvd., Suite 306
c/o CNA Financial, Inc
Deland, FL 32720

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 134
c/o CNA Financial, Inc
Deleon Springs, FL 32130

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:

Name of New Registered Agent: CNA Financial, Inc
New Registered Office Address: 990 N Woodland Blvd., Suite 306
Enter Florida street address
Deland, Florida 32720
City Zip Code

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.


K. G. Williams, PRESIDENT CNA FINANCIAL, Inc.
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>	<u>Address</u>	<u>Type of Action</u>
MGR	CNA Financial, Inc	990 N Woodland Blvd.	<input checked="" type="checkbox"/> Add
		Suite 306	<input type="checkbox"/> Remove
		Deland, FL 32720	
MGRM	Gabrielle Cater	c/o CNA Financial, Inc	<input checked="" type="checkbox"/> Add
		990 N Woodland Blvd., Suite 306	<input type="checkbox"/> Remove
		Deland, FL 32720	
MGRM	Sophia Kosmidis	c/o CNA Financial, Inc	<input checked="" type="checkbox"/> Add
		990 N Woodland Blvd., Suite 306	<input type="checkbox"/> Remove
		Deland, FL 32720	
MGRM	Melissa Alvarez	c/o CNA Financial, Inc	<input checked="" type="checkbox"/> Add
		990 N Woodland Blvd., Suite 306	<input type="checkbox"/> Remove
		Deland, FL 32720	
MGRM	Brandy Davis	c/o CNA Financial, Inc	<input checked="" type="checkbox"/> Add
		990 N Woodland., Suite 306	<input type="checkbox"/> Remove
		Deland, FL 32720	
MGRM	Othalys De La Cruz	c/o CNA Financial, Inc	<input checked="" type="checkbox"/> Add
		990 N Woodland Blvd., Suite 306	<input type="checkbox"/> Remove
		Deland, FL 32720	

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated August 16, 2013

Gabrielle Cater

Signature of a member or authorized representative of a member

Gabrielle E Cater

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00