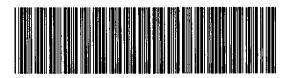
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(Re	questor's Name)	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA 2015
23

S. YOUNG



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED 15 NOV 23 PM 3: 11 SECRETARY OF STATE TALLAHASSEE, FLORIDA

November 16, 2015

P. TODD KENNEDY, ESQUIRE KENNEDY & KENNEDY, P.L. 14 SOUTHEAST 4TH STREET STE 36 BOCA RATON, FL 33432

SUBJECT: JULIE ADLER MAHFOOD, LLC Ref. Number: L13000013026

We have received your document for JULIE ADLER MAHFOOD, 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 specific purpose of the entity must be set forth in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young Regulatory Specialist II

Letter Number: 515A00024175

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15 NOV 12 PM 4: 47

SECRETARY OF STATE

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	JULIE ADLER MAHFOOD	, PLLC	
SUBJECT.	Name of Lin	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	P. Todd I	Kennedy, Esquire	
		Name of Person	
	Kennedy	& Kennedy, P.L.	
	·	Firm/Company	
	14 South	east 4th Street, Suite 36	
	Boca Rat	on, FL 33432	SECT A
		City/State and Zip Code	
		kennedypliaw.com	2 5 元
	E-mail address: (to be used for future annual report notif	ication) HG P
For further information	concerning this matter, please c	all:	FILED IZ R # 17 CORETARY OF STATE LIAMASSEE, FLORIDA
P. Todd Kennedy		561 683-2484	最后 5
Name	of Person	···· · · · · · · · · · · · · · · · · ·	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)
Regis Divisi P.O. I	LING ADDRESS: tration Section on of Corporations Box 6327 trassee, FL 32314	STREET/COURING Registration Section Division of Corport Clifton Building 2661 Executive Central Industrial Court Published Page 1881	n ations nter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JULIE ADLER MAHFOOD,	LLC	
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
he Articles of Organization for this Limited Liability Compar	ny were filed on	and assigned
lorida document number L13000013026		-
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited lia	ibility company here:	
JULIE ADLER MAHFOOD, PLLC		
he new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or	the abbreviation "L.L.C."
inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		75 5
nton none mailing address if anniholds.		器型る所
nter new mailing address, if applicable:		- 20
Mailing address MAY BE A POST OFFICE BOX)		205 \$
		<u> </u>
		3>, W
. If amending the registered agent and/or registered egistered agent and/or the new registered office address he		nter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	
	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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: MGR = Manager AMBR = Authorized Member <u>Title</u> <u>Name</u> <u>Address</u> **Type of Action** □ Add ☐ Remove □ Change □ Add _□ Remove ☐ Change 📮 Add Remove Change _□ Remove □ Change _□ Add _□ Remove _□ Change _□ Add

□ Remove

_□ Change

	mending the LLC (Julie Adler Mahfood, LLC) to a PLLC (Julie Adler Mahfood, PLLC).
	<u> </u>
_	The specific purpose of this LLC is real estate business.
	S 5
	ECR 2
	7784 ~
	データー デン
tive	e date, if other than the date of filing: (optional)
: If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste
nen	t's effective date on the Department of State's records.
·co	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie
	Oth day after the record is filed.
l	November 10 2015
	1 10cally ()(uses)
	Signature of a member of authorized representative of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00