

L13000142478

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

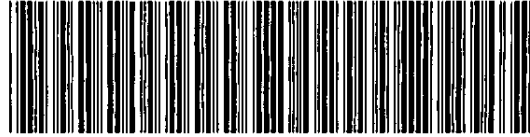
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 24 2015

10:10:11

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FLORIDA ASSET MANAGEMENT FIRM, 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:

KURT WESTFIELD

Name of Person

FLORIDA ASSET MANAGEMENT FIRM, LLC

Firm/Company

3030 ROCKY POINT

Address

TAMPA, FL 33607

City/State and Zip Code

KURT@FAMFIRM.COM

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

For further information concerning this matter, please call:

KURT WESTFIELD

Name of Person

at (813)

Area Code

865-3091

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
15 JUN 22 AM 10:120
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA ASSET MANAGEMENT FIRM, 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 10/09/2013 and assigned
Florida document number L13000142478.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

12906 TAMPA OAKS BLVD, SUITE 100

(Principal office address MUST BE A STREET ADDRESS)

TEMPLE TERRACE, FL 33637

Enter new mailing address, if applicable:

12906 TAMPA OAKS BLVD, SUITE 100

(Mailing address MAY BE A POST OFFICE BOX)

TEMPLE TERRACE, FL 33637

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, **Florida** _____
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>	<u>Type of Action</u>
MGRM	KURT WESTFIELD	3030 ROCKY POINT	<input checked="" type="checkbox"/> Add
		TAMPA, FL 33607	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	PETER MURPHY	12906 TAMPA OAKS BLVD, SU	<input checked="" type="checkbox"/> Add
		TEMPLE TERRACE, FL 33637	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	CHASE CLARK	12906 TAMPA OAKS BLVD, SU	<input checked="" type="checkbox"/> Add
		TEMPLE TERRACE, FL 33637	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	NICK PARRINELLO	5383 PRIMROSE LAKE	<input type="checkbox"/> Add
		TAMPA, FL 33647	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

NOTE: REMOVING NICK PARRINELLO AND ADDING PETER MURPHY AND CHASE CLARK.

KURT WESTFIELD REMAINS AS FOUNDER AND MGRM.

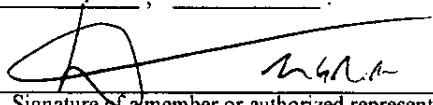
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated JUNE 19TH, 2015



Signature of a member or authorized representative of a member

KURT WESTFIELD

Typed or printed name of signee

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15 JUN 22 AM 10:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA