L08000028223

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
13 APR 22 PM 12:50

APR 23 2013

T. HAMPTON

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Anderson Group International, 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:

Brenda Anthony
Name of Person

Central Licensing Bureau
Firm/Company

1501 N University, Suite 550
Address

Little Rock, AR 72207
City/State and Zip Code

dreed@centrallicensingbureau.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brenda Anthony - Central Licensing Bureau at (501) 664-8044
Name of Person — 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

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
13 APR 22 AM 6:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 2, 2013

BRENDA ANTHONY
CENTRAL LICENSING BUREAU
1501 N UNIVERSITY - STE 550
LITLE ROCK, AR 72207

SUBJECT: ANDERSON GROUP INTERNATIONAL, LLC
Ref. Number: L08000028223

We have received your document for ANDERSON GROUP INTERNATIONAL, LLC and your check(s) totaling $30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

Please return the corrected original and one copy of 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.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 113A00007753

Anderson Musical Instrument
Insurance Solutions, Inc.
(dissolved 03/19/2013)
110 E Broward Boulevard, Suite 1700
Fort Lauderdale, FL 33301

April 8, 2013

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: INTENT OF DISSOLUTION

Dear Sir/Madam:

This letter is to inform you that the corporation Anderson Musical Instrument Insurance Solutions, Inc. which was dissolved effective 03/19/2013 has no intention of revoking this dissolution. As such, we release our name to be used by another entity.

If you have any questions or concerns, please do not hesitate to contact Brenda Anthony - Central Licensing Bureau at (501) 664-8044 or via email at corpqual@centrallicensingbureau.com

Sincerely,

Thomas Riley for
Peter T. Anderson
Managing Member

PA/bsa

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 APR 22 PM 12:50

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Anderson Group International, 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 03/18/2008 and assigned Florida document number L08000028223.

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This amendment is submitted to amend the following:

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

Anderson Musical Instrument Insurance Solutions, 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)

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

110 E Broward Boulevard
Suite 1700
Fort Lauderdale, FL 33301

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 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

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

Title	Name	Address	Type of Action
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	
_____	_____	_____	☐ Add
		_____	☐ Remove
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		_____	☐ Remove
		_____	

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

Dated 3/25, 2013

Signature of a member or authorized representative of a member

Thomas Riley for Peter Anderson, Managing Member

THOMAS. J. RILEY

Typed or printed name of signee

Filing Fee: $25.00

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