

L110000110924

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

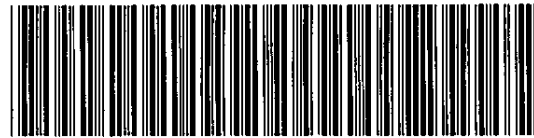
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE
15 MAR 17 PM 4:26
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10 AGING WITNESS
SUFFICIENCY OF FILING

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15 MAR 17 AM 11:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 23 2015

T. HAMPTON

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 5514797 8039606
AUTHORIZATION : *Lydia Cohen*
COST LIMIT : \$ 25.00

ORDER DATE : March 17, 2015
ORDER TIME : 3:47 PM
ORDER NO. : 551479-005
CUSTOMER NO: 8039606

DOMESTIC AMENDMENT FILING

NAME: A LAW FIRM OF GOLDSTEIN,
SCHMITT & ASSOCIATES, PLLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen -- EXT# 62974

EXAMINER'S INITIALS: _____

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: A Law Firm of Lauri J. Goldstein & Associates, PLLC
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:

Lawrence S. Klitzman

Name of Person

Klitzman Law Group, PLLC

Firm/Company

1391 Sawgrass Corporate Parkway

Address

Sunrise Fl, 33323

City/State and Zip Code

lsk@klitzlaw.com

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

For further information concerning this matter, please call:

Lawrence S. Klitzman

954 at ()

384-4421

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

RESUBMIT

Please give original
submission date as file date.

March 18, 2015

CORPORATION SERVICE COMPANY
COURTNEY WILLIAMS

SUBJECT: A LAW FIRM OF GOLDSTEIN, SCHMITT & ASSOCIATES, PLLC
Ref. Number: L11000110924

We have received your document for A LAW FIRM OF GOLDSTEIN, SCHMITT & ASSOCIATES, PLLC 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 effective date must be specific and cannot be prior to the date of filing.

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.

Tammy Hampton
Regulatory Specialist III

Letter Number: 715A00005442

15 MAR 20 PM 1:47
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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

A Law Firm of Goldstein, Schmitt & Associates, PLLC

(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 09/27/2011 and assigned
Florida document number L11000110924

This amendment is submitted to amend the following:

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

A Law Firm of Lauri J. Goldstein & Associates, PLLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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:

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

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15 MAR 17 AM 11:52
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TALLAHASSEE, FLORIDA

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated March 10, 2015

X

Lauri J. Goldstein

Signature of a member or authorized representative of a member

Typed or printed name of signer

Page 3 of 3
Filing Fee: \$25.00

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