## [01000005161

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ALLAHASSEE FINE INC.

J. BRYAN

NOV -4 2011

**EXAMINER** 

## **COVER LETTER**

Division of Corporations
SUBJECT: Stephen Bird Insurance Agency. 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:
Stephen BIRD Name of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency, we start in the Strain of Person  Stephen Bird Insurance Agency
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Stephen Bird at (352) 622-3849 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status  \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certificate of Status & Certified Copy

**MAILING ADDRESS:** 

Registration Section

. TO:

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

## STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Stephen Bird Insurance AGENCY 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 \_\_\_ Florida document number <u>LOI 00005161</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: INSURANCE AGENCY, The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" of 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) 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

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.

City

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 Type of Action Name | **Address** ∏Add Remove \_\_\_Add Remove □Add \_\_\_Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated October 24 Stepher Bird signature of a member or authorized representative of a member Bird
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00