

L03000000594

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

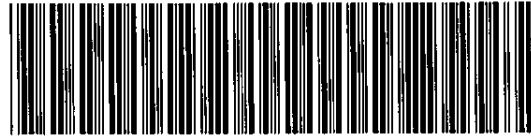
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Any Problems Please  
Call Anne  
@ 201-0942

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TALLAHASSEE, FLORIDA

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J. BRYAN

NOV 15 2012

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Brooks & Masterson, 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:

Joseph Brooks

Name of Person

Brooks & Masterson, LLC

Firm/Company

2629 Mitcham Drive

Address

Tallahassee, Florida 32308

City/State and Zip Code

jeb@sbmlaw.net

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

For further information concerning this matter, please call:

Anne Davis

Name of Person

at ( 850 ) 201-0942

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**Brooks & Masterson, 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 January 1, 2003 and assigned

Florida document number 800009826888  
LO3000000594

This amendment is submitted to amend the following:

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

**Brooks & Dunmire, 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)**

2629 Mitcham Drive

Tallahassee, Florida

32308

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

2629 Mitcham Drive

Tallahassee, Florida

32308

**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:

Joseph E. Brooks

New Registered Office Address:

2629 Mitcham Drive

*Enter Florida street address*

Tallahassee

*City*

, Florida 32308

*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

| <u>Title</u> | <u>Name</u>          | <u>Address</u>           | <u>Type of Action</u>                      |
|--------------|----------------------|--------------------------|--|
| MGRM         | Brian T. Dunmire     | 4298 Park Crossing Trail | <input checked="" type="checkbox"/> Add    |
|              |                      | Tallahassee, Florida     | <input type="checkbox"/> Remove            |
|              |                      | 32311                    |  |
| MGRM         | Stephen M. Masterson | 2946 Giverny Circle      | <input type="checkbox"/> Add               |
|              |                      | Tallahassee, Florida     | <input checked="" type="checkbox"/> Remove |
|              |                      | 32309                    |  |
|              |                      |                          | <input type="checkbox"/> Add               |
|              |                      |                          | <input type="checkbox"/> Remove            |
|              |                      |                          | <input type="checkbox"/> Add               |
|              |                      |                          | <input type="checkbox"/> Remove            |
|              |                      |                          | <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.)

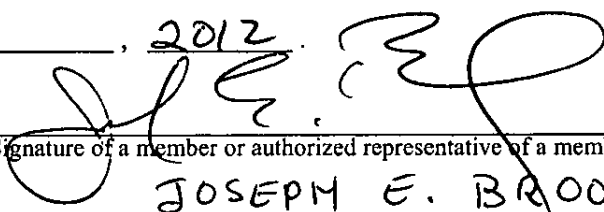
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated

11/13/

2012

Signature of a member or authorized representative of a member



JOSEPH E. BROOKS

Typed or printed name of signee

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Filing Fee: \$25.00

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