

L 0300000 6926

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

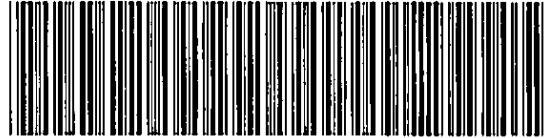
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

N/C

Amend

02/19/19

Dc



Edward A. Storey III
Jamie L. Storey
Suzanne V. Delaney

Christian J. Gendreau
Kyle Killeen
Michael T. Sheridan

February 20, 2019

VIA FEDERAL EXPRESS

CLIENT/MATTER NUMBER: 18-2310

Ms. Darlene Connell
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: **Stafford Inspection & Consulting Services, LLC**
Document No. L03000006926

Dear Darlene:

As we discussed, enclosed please find our REPLACEMENT check no. 13032, in the amount of \$25.00, in full payment of the fee for the Amendment for Stafford Inspection & Consulting Services, LLC.

Thank you and should you have any questions concerning this, please feel free to contact me.

Sincerely,

STOREY LAW GROUP, P.A.

Darcey E. Durant, CLA
Senior Paralegal

/dd
Encl.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STAFFORD INSPECTION & CONSULTING SERVICES, 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:

Edward A. Storey III

Name of Person

Storey Law Group, P.A.

Firm/Company

3670 Maguire Blvd., Suite 200

Address

Orlando, FL 32803

City/State and Zip Code

estorey@storeylawgroup.com

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

For further information concerning this matter, please call:

Edward A. Storey III

407

488-1225

at (_____) _____

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
2019 FEB 19 PM 4:13
SECRETARY OF STATE
TALLAHASSEE, FL

STAFFORD INSPECTION & CONSULTING SERVICES, 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 February 25, 2003 and assigned
Florida document number: L03000006926

This amendment is submitted to amend the following:

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

CSMII HOLDING LLC

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:

14202 Nell Drive

(Principal office address MUST BE A STREET ADDRESS)

Orlando, FL 32832

Enter new mailing address, if applicable:

14202 Nell Drive

(Mailing address MAY BE A POST OFFICE BOX)

Orlando, FL 32832

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:

14202 Nell Drive

Enter Florida street address

Orlando

City

Florida

32832

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
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		_____	<input type="checkbox"/> Change

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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.

Dated February 1, 2019

Signature of a member or authorized representative of a member

Typed or printed name of signee