

L04 00000 8856

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

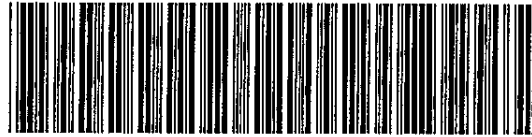
Certified Copies _____ Certificates of Status _____

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204-8856 NC

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Office Use Only



100042346201

09-7409-605 **20.00

04:10:55 - 04:11:40

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

RHB PROFESSIONAL SERVICES LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on FEB-2-04 and assigned
document number L04000008856

SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited
liability company:

NAME CHANGE TO

AMERICANS FOR DISABLED ACCESS LLC

Dated 9-19-04

Robert Blackseth

Signature of a member or authorized representative of a member

ROBERT BLACKSETH

Typed or printed name of signee

04:03-3 (11:12:55)

Filing Fee: \$25.00

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RHB Professional 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:

Jo Ann Banks
(Name of Person)

RHB Professional Services LLC
(Firm/Company)

5 Fig Ct. W
(Address)

Homosassa, FL 34446
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert Blackseth at (775) 857-4888
(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)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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