

L040000016302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

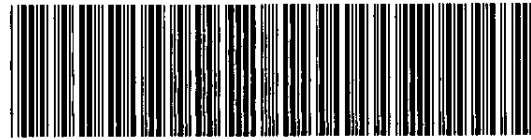
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER

DEC 5 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pro Fire Equipment, 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:

Courtney Townsend
Name of Person

Pro Fire Equipment
Firm/Company

3352 Dixie Hwy NE
Address

Palm Bay, FL 32905
City/State and Zip Code

palmbayfire@yahoo.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

CJ Townsend at (321) 591-4296
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**

Pro Fire Equipment, 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 03/01/2004 and assigned
Florida document number LO4000016302.

This amendment is submitted to amend the following:

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

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)

3352 Dixie Hwy NE

Palm Bay, FL

32905

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3352 Dixie Hwy NE

Palm Bay, FL

32905

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:

Courtney Townsend

New Registered Office Address:

3352 Dixie Hwy NE

Enter Florida street address

Palm Bay

City

, Florida

32905

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.

Courtney Townsend
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>
<u>MGR</u>	<u>Walker, Jonathan G</u>	<u>4210 Dorwood Dr.</u> <u>Orlando, FL 32818</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove *
<u>MGR</u>	<u>Walker, Marisol B</u>	<u>4210 Dorwood Dr.</u> <u>Orlando, FL 32818</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove *
<u>Pres</u>	<u>Courtney Townsend</u>	<u>2315 S. Pennwood Dr.</u> <u>Melbourne, FL 32901</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>V.P.</u>	<u>Larry Townsend</u>	<u>2315 S. Pennwood Dr.</u> <u>Melbourne, FL 32901</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGR</u>	<u>Adam Hecht</u>	<u>3560 Aria Dr.</u> <u>W. Melbourne, FL 32904</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Sec.</u>	<u>Patricia Townsend</u>	<u>2315 S. Pennwood Dr.</u> <u>Melbourne, FL 32901</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated _____, _____.

Signature of a member or authorized representative of a member

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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