L04000036722

(Requestor's Name)
(Address)
(Address)
·
(City/State/Zip/Phone #)
(ci.), ciaio 2 p
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
(Social Cultural)
Confidence Continue Confidence of Obstance
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
L

Office Use Only



600121663716

04/14/08--01021--006 ++35.00

08 APR 25 AM 10: 17

SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

APR 2 8 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: SCOTT P. ABRAHAM 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:
Scott P. ABRAHAM (Name of Person)
Scort P. ABRAHAM LLC (Firm/Company)
14536 SUNDIAL PLACE (Address)
(Address)
BRADENTON FL 34202
(City/State and Zip Code)
For further information concerning this matter, please call:
Scott ABRAHAM at 941, 705-0963 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \times \text{\$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) \[\text{PA.SES 935} \] \[\$35.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) \]
SEE LATTER
MAILING ADDRESS: STREET/COURIER ADDRESS: Position Section Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



April 17, 2008

SCOTT ABRAHAM 14536 SUNDAIL PLACE BRADENTON, FL 34202

SUBJECT: SCOTT P. ABRAHAM LLC

Ref. Number: L04000036722

We have received your document for SCOTT P. ABRAHAM LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II Registration/Qualification Section

Letter Number: 508A00023056

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

P. ABRAHAM 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 2/4/08 and assigned Florida document number <u>L04</u>000636722 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." 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:

SCOTT ABRAHAM

14536 SUNDAL PL

(Enter Florida street address)

RRADENTON
, Florida
(Zip Code) Name of New Registered Agent: New Registered Office 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.

(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> Name **Address** Type of Action ☐ Add Remove Add 🗌 Remove Add Remove \Box Add Remove Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated_ gnature of a member or authorized representative of a member ABRAHAM Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00