

LD4000040604

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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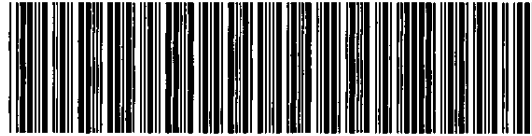
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PROVIDER RESOURCES 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:

Jerry L. Bennett

(Name of Person)

c/o PROVIDER RESOURCES LLC

(Firm/Company)

P O Box 60623

(Address)

Palm Bay, FL 32906-0623

(City/State and Zip Code)

For further information concerning this matter, please call:

Jerry L. Bennett

(Name of Person)

at (**321**) **698-4477**

(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**

PROVIDER RESOURCES LLC

(Present Name)
(A Florida Limited Liability Company)

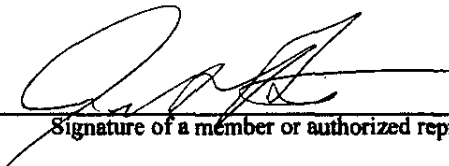
FIRST: The Articles of Organization were filed on 05/24/2004 and assigned document number L04000040604 (FEI Number 141909961)

SECOND: This amendment is submitted to amend the following:

Whereas **Sandra D. Bennett** is one of the two members of **Provider Resources LLC** and she and the other member, **Jerry L. Bennett**, are getting a divorce; she is turning over all responsibilities and obligations of this LLC to him. It will become a single member LLC with an FEIN number (14-1909961). It should continue to be taxed as though it was an "S" corporation. Jerry L. Bennett will be the only member and also the registered agent. The physical address of the LLC will be: 450 Aviation Ave, Palm Bay, FL 32907. Any mail should be sent to: Jerry L. Bennett % Provider Resources LLC, P O Box 60623, Palm Bay, FL 32906-0623. The phone number to reach him is (321) 698-4477.

Sandra D. Bennett will have no further obligations or responsibilities for this LLC or it's business conduct effective with the filing and acceptance of this amendment.

Dated September 14, 2007.



Signature of a member or authorized representative of a member

Jerry L. Bennett

Typed or printed name of signee

Filing Fee: \$25.00

07 OCT -3 PM 3:03

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

September 26, 2007

Sub; Letter # 507A00055484
Provider Resources LLC

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.

A handwritten signature in black ink, appearing to read "Jerry L. Bennett", written over a horizontal line.

Jerry L. Bennett