

L04000062542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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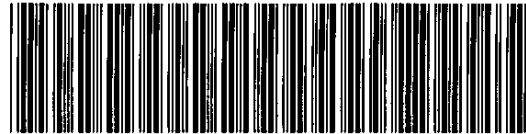
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AUDIT AND RECONCILIATIONS 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:

FERNANDO OXRUD

(Name of Person)

AUDIT & RECONCILIATIONS LLC

(Firm/Company)

2158 PASA VERDE LN

(Address)

WESTON, FL 33327

(City/State and Zip Code)

For further information concerning this matter, please call:

FERNANDO OXRUD

(Name of Person)

at (786) 287 5515

(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

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

AUDIT & RECONCILIATIONS LLC

(Present Name)
(A Florida Limited Liability Company)

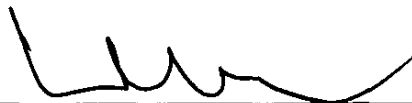
FIRST: The Articles of Organization were filed on 08/24/2004 and assigned
document number Document Number L04000062542

SECOND: This amendment is submitted to amend the following:

FERNANDO OXRUD WILL CEASE HIS FUNCTION AS MANAGER AND WILL BECOME MANAGING MEMBER

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Dated SEPTEMBER 28, 2007



Signature of a member or authorized representative of a member

FERNANDO OXRUD

Typed or printed name of signee

Filing Fee: \$25.00