

LD4 000064201

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

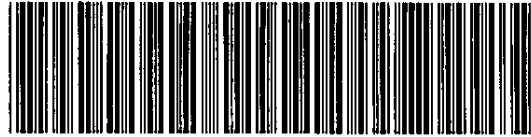
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 10 2014

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 6, 2014

THE MILLER GROUP COMPANY LLC
2430 RIDGEMOOR DRIVE
ORLANDO, FL 32828

SUBJECT: THE MILLER GROUP COMPANY LLC
Ref. Number: L04000064201

We have received your document for THE MILLER GROUP COMPANY LLC and your check(s) totaling \$516.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the above listed entity is no longer available. Please file an amendment changing the name of this entity. The amendment filing fee is ~~\$35.00~~ \$25.00.

In order to complete your filings, both the reinstatement application and name change amendment must be submitted together with the applicable fees for processing.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Robin Easom
Regulatory Specialist II

Letter Number: 014A00016869

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL 32314

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE MILLER GROUP COMPANY, 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:

CHARLES P. MILLER JR.
Name of Person

THE MILLER GROUP COMPANY, LLC
Firm/Company

2430 RINGMOOR DR.
Address

ORLANDO, FL 32828
City/State and Zip Code

CHUCK @ PAVESCAPES INC. NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles Miller at (407) 709-0056
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

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TALLAHASSEE, FLORIDA

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

THE MILLER GROUP COMPANY, 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 _____ and assigned
Florida document number L04000064201.

This amendment is submitted to amend the following:

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

CKB3, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2430 RIDGEMOOR DR
ORLANDO, FL 32828

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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ALBANY, FLORIDA

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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: _____

New Registered Office Address: _____

Enter Florida street address

_____, **Florida**

City

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 605, 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 Authorized Member on our records; enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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AMBR	KAREN MILLER	2430 RINGMOOR DR ORLANDO, FL 32828	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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☐ Add

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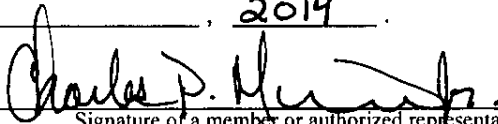
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 8/19/14, 2014



Signature of a member or authorized representative of a member

CHARLES P. MILLER JR.

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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