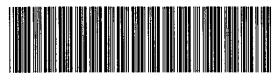
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(Requ	estor's Name)	
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(City/s	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to Fil	ing Officer:	
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### **COVER LETTER**

	gistration Se ision of Cor					
SUBJECT:		Connor-Teperman LLC				
SCHULC I.		Name of Lin	nited Liability Company			
The enclosed	d Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return	n all correspo	ndence concerning this matter	to the following:			
		Terry K O'Connor				
			Name of Person			
			Firm/Company			
		455 Mohawk Lane				
		<del></del>	Address			
		Boca Raton, FL 33487				
			City/State and Zip Code			
		tkoace1@gmail.com		Ę	<b>* 2</b>	
		E-mail address <sup>1</sup> (	to be used for future annual report no	tification)	ZONZ J	,
For further in	nformation co	oncerning this matter, please c	all:	A A		45 WHATES
Terry K O'C	onnor		561 945-0909	,	i di	
	Name of	Person	Area Code Daytii	me Telephone Number OR III	· (7)	O
Enclosed is a	a check for th	e following amount:			J	
■ \$25.00 F	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	

#### 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

Terry K O'Connor-Teperman LLC					
( <u>Name of the Lim</u>	ited Liability Compa (A Florida Limited)	ny as it now appear Liability Company)	s on our records.)		
he Articles of Organization for this Limited lorida document number L04000077490	Liability Company	were filed on 10-	26-2004	and as	ssigned
his amendment is submitted to amend the fol	llowing:				
. If amending name, enter the new name	of the limited liab	ility company he	<u>re</u> :		
erry K. O'Connor LLC					
he new name must be distinguishable and contain the	words "Limited Liabil	lity Company." the d	esignation "LLC" or the	abbreviation "L	J.L.C."
Enter new principal offices address, if applicable:		455 Mohawk La	ne		
Principal office address MUST BE A STREET ADDRESS)		Boca Raton, FL	33487		
nter new mailing address, if applicable: <u>Aailing address MAY BE A POST OFFICE</u>	E BOX)	<del></del>			
	<del></del>				
. If amending the registered agent and egistered agent and/or the new registered of			our records, ent	A MARIANA	of the
Name of New Registered Agent:	Terry K O'Conr	nor	<u>,                                    </u>		777
New Registered Office Address:	455 Mohawk L		ida street address	C .	Ö
•	Boca Raton		iaa sireer aaaress D D F Florida	33487	
		City		Zin 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 Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = M $AMBR = A$	lanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
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fective date if other than the date of filings	
fective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to date of force:  If the date inserted in this block does not meet the applicable statut bounders's effective date on the Department of State's records	iling or more than 90 days after filing.) Pursuant to 605.026 ory filing requirements, this date will not be listed a
record specifies a delayed effective date, but not an effe The 90th day after the record is filed.	ective time, at 12:01 a.m. on the earlier
ned 2-28-17	
0	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00