L04000085822

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(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. CAUSSEAUX
DEC 1 2010
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rochelle A. Reback Attorney & Associates at Law PLC
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:

Rochelle A. Reback
Name of Person

Reback Law PL
Firm/Company

400 North Ashley Drive, Suite 1100
Address

Tampa, FL 33602
City/State and Zip Code

rareback@rebacklaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rochelle A. Reback at (813) 251-9660
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

FLORIDA DEPARTMENT OF STATE
Division of Corporations

Rochelle
cell #
813 361-9660

November 24, 2010

ROCHELLE A. REBACK
400 NORTH ASHLEY DRIVE
SUITE 1100
TAMPA, FL 33602

SUBJECT: ROCHELLE A. REBACK ATTORNEYS & ASSOCIATES AT LAW PLC
Ref. Number: L04000085822

We have received your document for ROCHELLE A. REBACK ATTORNEYS & ASSOCIATES AT LAW PLC and your check(s) totaling $25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return 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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 810A00027557

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
10 NOV 30 AM 9:55
TALLAHASSEE, FLORIDA

Rochelle A. Reback Attorney & Associates at Law PLC
(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 11/29/2004 and assigned Florida document number L04000085822.

This amendment is submitted to amend the following:

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

Reback Law PL

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

Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

400 North Ashley Drive
Suite 1100
Tampa, FL 33602

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

400 North Ashley Drive
Suite 1100
Tampa, FL 33602

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: Rochelle A. Reback

New Registered Office Address: 400 North Ashley Drive, Suite 1100
Enter Florida street address

Tampa, **Florida** 33602
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 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.

No 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

Title	Name	Address	Type of Action
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

New fax number 813-984-3070

10 NOV 30 AM 9:55

FILED

Dated November 30, 2010.

11-30-2010

Signature of a member or authorized representative of a member

Rochelle A. Reback

Typed or printed name of signee

Filing Fee: $25.00