

L04000092090

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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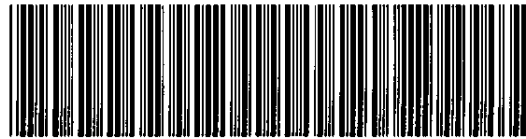
(Business Entity Name)

(Document Number)

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2011 NOV 18 PM 1:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

NOV 01 2011

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Welton & Williamson, 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:

Mark Welton

Name of Person

The Welton Law Firm

Firm/Company

1020 South Ferdon Blvd.

Address

Crestview, Florida 32536

City/State and Zip Code

mhwelton@mac.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Welton

Name of Person

at (**850**)

682-2120

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**

FILED

Welton & Williamson, LLC

2011 NOV 18 PM 1:47

(Name of the Limited Liability Company as it now appears on our records) **CLERK OF STATE**
(A Florida Limited Liability Company) **TALLAHASSEE, FLORIDA**

The Articles of Organization for this Limited Liability Company were filed on 12/20/2004 and assigned
Florida document number L04000092090.

This amendment is submitted to amend the following:

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

The Welton Law Firm, LLC

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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: Mark Welton

New Registered Office Address: 1020 South Ferdon Blvd.

Enter Florida street address

Crestview, Florida 32536
City 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.

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 of Managing Member being added or removed from our records:

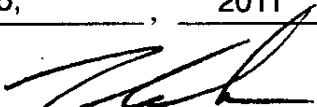
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGMR	A. Wayne Williamson	1020 South Ferdon Blvd. Crestview, FL 32536	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGMR	Joseph Denison	1621 Deer Tract Rd. Opelika, AL 36801	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

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2011 NOV 18 PM 1:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated November 15, 2011



Signature of a member or authorized representative of a member

MARK H. WELTON, MGRM
Typed or printed name of signee