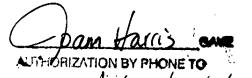
L05000058576

(Requestor's Name)				
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Certified Copies	Certificates	of Status		
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Special Instructions to	Filing Officer:			
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Office Use Only





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J. BRYAN

MAR 2 4 2008

EXAMINER

nt & Change Name to.
The Narris Group & Associates, LLC



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 11, 2008

JOANN HARRIS THE HARRIS GROUP, LLC 205 GOLDEN GATE POINT #302 SARASOTA, FL 34236

SUBJECT: HARRIS PARKER & ASSOCIATES LLC

Ref. Number: L05000058576

We have received your document for HARRIS PARKER & ASSOCIATES LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$11.25.

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 108A00014869

Enclosed is the Correct Joins. Please Send me a cent. of Status. I have Paid \$43.75 however the file feet is \$30.00. Please issue a rejund to "Joann Harris." Thank you

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

Division of Co		TEQ.11.0				
SUBJECT: HARRIS	SUBJECT: HARRIS PARKER & ASSOCIATES LLC (Name of Limited Liability Company)					
	f Amendment and fee(s) are sub condence concerning this matter					
rease return an corresp	onderioe concerning and matter	to die following.				
	Joann Harris	(Name of Person)				
	THE HARRIS GROU	JP, LLC. (Firm/Company)				
	205 Golden Gate Po	oint - # 302 (Address)				
	Sarasota, Florida 34	1236 (City/State and Zip Code)				
For further information	concerning this matter, please of	call:				
Joann Harris		at (941) 952-1028				
(Name of Person)		(Area Code & Daytime To	elephone 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)			
Regis Divis P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center	ns			

Tallahassee, FL 32301

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Registration Section

ARTICLES OF AMENDMENT TO **ARTICLES OF ORGANIZATION**

(A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on <u>June 13, 2005</u> and assigned
Florida document number <u>L05000058576</u> .
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
THE HARRIS GROUP & ASSOCIATES, LLC
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
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)
Plovido
, 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 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

(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 = M MGRM =	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			AddRemove
			Add Remove
			Add Remove
D. If amen		change(s) here: (Attach additional sheets, ij	f necessary.)
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 Dated Mar	rch 18	2008	
	Spriature of a r	nember or authorized representative of a member	<u>r</u>
	Joann Harris //	Typed or printed name of signee	···

Page 2 of 2

Filing Fee: \$25.00