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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Robert L. Reynard CPA, 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:
Robert L. Reynard (Name of Person)
Robert L. Reynard, CPA, UC. (Firm/Company)
909 North Miami Beach Blud #201
MIAMI, Florida 33162 (City/State and Zip Code)
For further information concerning this matter, please call:
For further information concerning this matter, please call: Robert Reynard (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount:
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{\$\sum{\subset}{\subseteq} \subseteq \sub

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

FIRST:	The Articles of Organization were filed on July 19,2005 and assigned document number <u>L05000070860</u> .	
SECOND:	This amendment is submitted to amend the following: Principal address from 5333 Collins ANH 401, Miami Beach, Florida 333140	
	Please change principal address to: 909 North Miami Beach Bouleva Suite 201 Hiami, Flori DA 33162	ud FIED
Dated	September 9, 2005.	
	Signature of a member or authorized representative of a member Robert L. Reyngr. Timed by printed name of signer	

Filing Fee: \$25.00