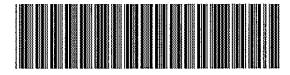
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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
Amend		

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## **COVER LETTER**

	TO: Registration Section Division of Corporations
•	SUBJECT: CENTRAL FLOIRDA SAFETY TRAINING CONSULTANTS LO
	The enclosed Articles of Amendment and fee(s) are submitted for filing.
	Please return all correspondence concerning this matter to the following:
	LEE C. PAXTON (Name of Person)
	(Name of Person)
	CENTRAL FLORIDA SAPETY TRAINING CONSULTANTSLL
	P.O. Box 90094
	(Address)
	LAKELAND FL 33 804 (City/State and Zip Code)
	(City/State and Zip Code)
	For further information concerning this matter, please call:
	LEE RAY TOW at (863 412 6303 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
	Enclosed is a check for the following amount:
	\$25.00 Filing Fee \$\ \text{S30.00 Filing Fee & }\ \text{Certificate of Status} \text{Certified Copy} \text{S60.00 Filing Fee, }\ \text{Certificate of Status & }\text{Certificate of Status & }Certificate of Statu
	(additional copyris enclosed) Certified Copy (additional copyris 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

CORRECT TO:

CENTRAL	FLORIDA	SAFETY	TRHINING	CONSULTANTS	LLC
		(Present Name)			

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Filing Fee: \$25.00