## L05000121728

(Re	equestor's Name)			
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(Cit	ty/State/Zip/Phon	e #)		
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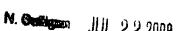


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SECRETARY OF STATE

8 JUL 21, AMII:



## **COVER LETTER**

TO:	Registration Sec Division of Corp		•	
SUBJ	ECT:	Ansel & Miller	r, LLC	
			ited Liability Company)	
The er	nclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspor	ndence concerning this matter	to the following:	
Ronald L. Miller				
(Name of Person)				
		Anse	el & Miller, LLC	<del></del>
			(Firm/Company)	
		601 S	outh Ocean Drive	
			(Address)	
		Holl	ywood, FL 33019	
			(City/State and Zip Code)	
For fu	rther information co	oncerning this matter, please c	all:	
	Ronald	d L. Miller	at ( 954 ) 922-9100	
	(Name o	f Person)	(Area Code & Daytime T	elephone Number)
Enclo	sed is a check for the	e following amount:	/	
<b>년</b> \$2	5.00 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)
	MAILI	NG ADDRESS:	STREET/COURIER	ADDRESS:

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Ansel, Bunsic & Miller, LLC

(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 Liab	ility Company were filed on 12/22/20	05 and assigned
Florida document number L05000121728		
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of th	ne limited liability company here:	
Ansel & Miller, LLC		
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liability Company," t	he designation "LLC" or the abbreviation
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	•
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	NY)	
	·	
B. If amending the registered agent and/or registered agent and/or the new registered offic		ecords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter F	lorida street address)
		, 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 company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<b>Type of Action</b>
MGR	Timothy M. Bunsic,P.A.	1344 S.W. 173 Way Pembroke Pines, FL 33029	Add Remove
			Add Remove
			<b>=</b> ~
			Add Remove
			Add Remove
D. If amen	July 14 , 2008	nge(s) here: (Attach additional sheets, if neces:	08 JUL 21 AN II: 20 SECRETARY OF STATE TALLANIASSE FLORIDA
	Signature of a memb	per or authorized representative of a member	
	Ronald L. Miller		
	Туре	ed or printed name of signee	<del></del>

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Filing Fee: \$25.00