L05000/22313

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A. LUNT

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EXAMINER

COVER LETTER

TO: Registration Se Division of Cor	
SUBTROTE U.S. Prob	pate Solutions, L.L.C.
SUBJECT.	(Name of Limited Liability Company)
The enclosed Articles of	Amendment and fce(s) are submitted for filing.
Please return all correspo	ndence concerning this matter to the following:
	Robert Kurtzer MGR
	(Name of Person)
	U.S. Probate Solutions, L.L.C. (Firm/Company)
	(Pritite Company)
	3300 NE 192nd. St. Suite 1814
	Aventura, FL 33180-2436 (City/State and Zip Code) (Address) (Address) (City/State and Zip Code)
	Aventura, FL 33180-2436
	(City/State and Zip Code)
For further information co	oncerning this matter, please call:
Robert Kurtzer	at (786) 566-1112
(Name o	of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for th	e following amount:
\$25.00 Filing Fee	✓\$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

U.S. Probate Solutions, L.L.C. (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 Liability Company were filed on December 27, 2005 and assigned Florida document number L05000122313 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "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: 3300 NE 192nd. Street Suite 1814 New Registered Office Address: (Enter Florida street address) Aventura Florida 33180-2436 (City)

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 or Managing Member being added or removed from our records:

MGR = Ma MGRM = N	mager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Acti
			Add Remov
			Add Remov
			*
			Add Remov
		TALLAHASSE.	Add Remov
D. If amen	ding any other information, enter chang	75	FRemov
_			
 Dated <u>12/1</u>	5/2007		
	Kobert Huther Signature of a membe	Manager Repostered	agent
	Robert Kurtzer MGR	l or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00