

L05000122313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

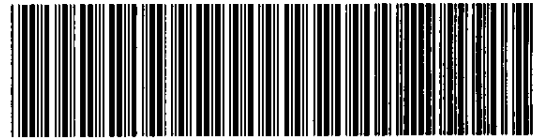
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200210824722

08/19/11--01013--016 \*\*30.00

FILED  
2011 AUG 19 AM 9:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. SAULSBERRY  
EXAMINER

AUG 22 2011

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: U.S. Probate Solutions, 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 Kurtzer

Name of Person

U.S. Probate Solutions, LLC.

Firm/Company

19390 Collins Ave., Suite 1617A

Address

Sunny Isles Beach, FL 33160-2232

City/State and Zip Code

Rkurtzer@atlanticbb.net

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 AUG 19 AM 9:12

FILED

For further information concerning this matter, please call:

Robert Kurtzer

Name of Person

at ( 305 )

692-5803

Area Code & Daytime Telephone 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)

### 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, 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 Liability Company were filed on December 27, 2005 and assigned

Florida document number L05000122313

**FILED**  
2011 AUG 19 AM 9:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

**(Principal office address MUST BE A STREET ADDRESS)**

19390 Collins Ave., Suite 1617A

Sunny Isles Beach, FL 33160-2232

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

19390 Collins Ave., Suite 1617A

Sunny Isles Beach, FL 33160-2232

**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:

19390 Collins Ave., Suite 1617A

*Enter Florida street address*

Sunny Isles Beach, FL

Florida

33160-2232

*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 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 = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Daniel Feller	1305 St. Tropez Circle Unit 2010 Weston, FL 33326	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Robert Kurtzer	19390 Collins Ave., Suite 1617A Sunny Isles Beach, FL 33160-2232	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Robert Kurtzer	3300 NE 192nd St. Suite 1814 Aventura, FL 33180	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Please note Sunny Isles address  
Suite # has changed.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 AUG 19 AM 9:12

FILED

Dated August 16, 2011

Robert Kurtzer MGRM  
Signature of a member or authorized representative of a member

Robert Kurtzer

Typed or printed name of signee