

LOG 00000 DS825

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

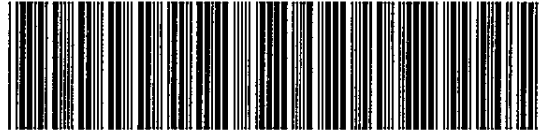
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500070373235

04/17/06--01009--022 **60.00

06 APR 17 AM 10:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

4/20
Chick

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: College of Health and Public Safety
(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:

Tina Palermo

(Name of Person)

College of Health and Public Safety

(Firm/Company)

5033 Okeechobee Blvd

(Address)

West Palm Beach, Florida 33417

(City/State and Zip Code)

For further information concerning this matter, please call:

Tina Palermo

(Name of Person)

at (561) 252-8801

(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 APR 17 AM 10:05

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

College of Health and Public Safety

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on Jan. 17, 2006 and assigned document number L06000005525.

SECOND: This amendment is submitted to amend the following:

Manager/Member Detail

Michael Alpert Mgr to Tina Palermo President

Rick Michalak Mgr to Martin Palermo Vice-President

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 APR 17 AM 10:05

FILED

Dated April 2, 2006.

Tina Palermo
Signature of a member or authorized representative of a member

Tina Palermo
Typed or printed name of signee

Filing Fee: \$25.00