# 106000024054

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#### COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

RPM Business Advisors, LLC SUBJECT: \_ 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: Marc Simms Name of Person RPM Business Advisors, LLC Firm/Company 9040 Town Center Parkway Address Lakewood Ranch, FL 34202 City/State and Zip Code msimms@rpmba.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Marc Simms 941 224-8077 Daytime Telephone Number Name of Person Area Code Enclosed is a check for the following amount: ■ \$30.00 Filing Fee & □ \$60.00 Filing Fee, □ \$25.00 Filing Fee □ \$55.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

2661 Executive Center Circle

Tallahassee, FL 32301

### TOARTICLES OF ORGANIZATION **OF**

APM Business Advisor	<i>2, 42</i>				
(Name of the Limited Liability Compa (A Florida Limited	nny as it now appears on our records.) Liability Company)				
The Articles of Organization for this Limited Liability Company were filed on March 6th, 2006 and assigned Florida document number L06000024054					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	oility company here:				
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "LLC."				
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)	77				
	<u> </u>				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)					
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her					
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
	, Florida				
	City Zip Code				
New Registered Agent's Signature, if changing Registered Agent:					
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is				

If Changing Registered Agent, Signature of New Registered Agent

#### or removed from our records:

## MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name 7	Address	Type of Action
MGR	Lynne Zecca	6403 67th St. East Bradenton, FL 34203	
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. Effective date, if other than the	o data of filing:	lop	tional)
(If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the I	ist be specific and cannot be prior to dolock does not meet the applicable	late of filing or more than 90 days aft	ter filing.) Pursuant to 605.0207 (3)(
the record specifies a delaye  ) The 90th day after the rec		n effective time, at 12:01	a.m. on the earlier of:
November 26	2018		
Dated	luins		
	Signature of a member or authorize	ed representative of a member	
	Marc Simin Typed or printed no	く C	
<del></del>	Typed or printed na	ame of signee	

Page 3 of 3

Filing Fee: \$25.00