LO4000037270

(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	state/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Nan	ne)
(Docui	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ng Officer;	

Office Use Only



900095156039

04/03/07--01018--009 **25.00

2001 APR -3 AM II: 01
SECRETARY OF STATE
ANALYSEE, FLORIDA

100 312 70.

COVER LETTER

Division of Corporations
SUBJECT: Crouse a Carron office 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:
Patty Couse (Name of Person)
(Firm/Company) 5895 Keith Road (Address) Tupiter FL 33458 (City/State and Zip Code)
Jupiter, FL 33458 (City/State and Zip Code) (City/State and Zip Code)
For further information concerning this matter, please call:
For further information concerning this matter, please call: Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$25.00 Filing Fee \$ Certificate of Status \$55.00 Filing Fee \$ Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS:

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

TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Crouse & Carnon Office Solutions, LLC.

(Present Name)
(A Florida Limited Liability Company)

FIRST:	The Articles of Organization were filed on $\frac{4 - 10 - 2006}{4 - 10 - 2006}$ and assigned document number $\frac{20600037210}{4 - 10 - 2006}$		
SECOND:	This amendment is submitted to amend the following: Change name to:		
•	Crouse Office Solutions, L	<u>I</u> C.	
	ASA	2007 APR -	r (T)
Dated	March 30, 2007	3 AMII: 0	1 4 4
<u></u>	Signature of a member or authorized representative of a member	_	
	Typed or printed name of signee	 -	

Filing Fee: \$25.00