

LO6000060912

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

LO6-60912

(Document Number)

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TALLAHASSEE FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Loss Prevention Services, 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:

Claire Larocque

(Name of Person)

Loss Prevention Services, LLC

(Firm/Company)

3150 W. Hallandale Beach Blvd., Lot #10

(Address)

Hallandale Beach, Florida 33009

(City/State and Zip Code)

For further information concerning this matter, please call:

Claire Larocque

(Name of Person)

at ( 954 ) 319-1771

(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**

Loss Prevention Services, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on June 15, 2006 and assigned document number L06000060912.

**SECOND:** This amendment is submitted to amend the following:

Articles II - Street and mailing address:

3150 W. Hallandale Beach Blvd., Lot #10, Hallandale Beach, Florida 33009

Article IV - Florida Street address of registered agent:

3150 W. Hallandale Beach Blvd., Lot #10, Hallandale Beach, Florida 33009

Dated November 10, 2006



Signature of a member or authorized representative of a member

Claire Larocque

Typed or printed name of signee

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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Filing Fee: \$25.00