LObooc	
(Requestor's Name) (Address) (Address)	DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA: 800076570778
(City/State/Zip/Phone #)	07/06/0601032015 **25.00
(Document Number)	· · ·
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## **COVER LETTER**

FILED TO: **Registration Section Division of Corporations** 2006 JUL -6 PM 1:33 SUBJECT: CONTRACTIONS TALLAHASSEE, FLORIDA

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donother C. Name of Person

(Firm/Company)

= /tp

(City/State and Zip Code)

For further information concerning this matter, please call:

(Area Code & Daytime Telephone Number) Name of Person)

Enclosed is a check for the following amount:

\$25.00 Filing Fee

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\$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

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	ТО
	ARTICLES OF ORGANIZATION FILED
	OF 2006 JUL - 6 PM 1: 33
	ADA Family Support LL CTALLAHASSEE, FLORIDA
	(A Florida Limited Liability Company)
	$3 \cdot 2 \cdot 2m/$
IRST:	The Articles of Organization were filed on <u>Supe 23</u> , 2006 and assigned document number <u>Loc 0000 402</u> .
ECOND:	This amendment is submitted to amend the following:
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	of Angeleta Gery VP att.
	Donother C. Johnson Valed.
	Alberty Me Crathy Sct. Trot
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Dated	1/ 6/2006
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	Suttingues of a member or authorized representative of a member
	Another of a member or authorized representative of a member

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Filing Fee: \$25.00