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Amend



FEB 10 2015 N. CAUSSEAUX

COVER LETTER

Division of Co	orporations		
Progres	ssive Brokerage Services	s, LLC	
SUBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
	William E. Taylor		
		Name of Person	
	Registered Agent		
		Firm/Company	<u> </u>
	630 Maplewood Driv	ve, Suite 100	•
		Address	
	Jupiter, Florida 3345	58	
		City/State and Zip Code	
	bill@skholdings.com	to be used for future annual report notif	ication)
For further information	concerning this matter, please or	•	eatton)
William E. Taylor		561 625-9443	
Name	of Person	at () 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:

TO:

Registration Section

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

Progressive Brokerage Services, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on July 28, 2006 and assigned Florida document number L06000075061 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation 401 Moorings Drive Enter new principal offices address, if applicable: Lantana, Florida 33462 (Principal office address MUST BE A STREET ADDRESS) 630 Maplewood Drive Enter new mailing address, if applicable: Suite 100 (Mailing address MAY BE A POST OFFICE BOX) Jupiter, Florida 33458 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: N/A Name of New Registered Agent: N/A New Registered Office Address: Enter Florida street address Florida City

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRV	William F. Gould	2650 Lakeshore Drive	Add
		Unit 1201	□ Remove
		Riviera Beach, Florida 33403	
MGRV	John F. Hodgdon	12700 Whitney Street	□ Add
		Wellington, Florida 33414	Remove
			Romove
			-2 PB
			OR HERMOVE
			□ Add
			Remove
		·	Remove

N/A	ıl sheets, if necessary.
•	
 	
Effective date, if other than the date of filing: The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be n	(optional)
the date this document is filed by the Florida Department of State)	
	a member

Page 3 of 3

Filing Fee: \$25.00

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