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**EXAMINER** 



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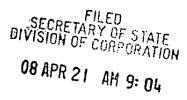
## **COVER LETTER**

TO: Registration Section Division of Corporations					
SUBJECT: McIntyre, Deese, Baruch, Panzarella & Thanasides, P.L.  (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:					
Richard J. McIntyre  (Name of Person)					
McIntyre, Deese, Baruch, Panzarella & Thanasides, P.L.  (Firm/Company)					
6943 E. Fowler Avenue (Address)					
Temple Terrace, Florida 33617 (City/State and Zip Code)					
For further information concerning this matter, please call:					
Terri Johnson at (813 ) 899-6059 (Name of Person) (Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee \$\ \times \text{\$\frac{1}{2}}\$					
MAILING ADDRESS. STREET/COURIER 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**



i.

McIntyre, Deese, Baruch, Pa (Name of the Limited ) (A)	anzarella, Thanasides & Ly Liability Company as it now appe Florida Limited Liability Company)	nch, P.L. ars on our records.)			
The Articles of Organization for this Limited Lia	bility Company were filed on 11	1/16/2006 and assigned			
Florida document number <u>L06000111485</u>	·				
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of the limited liability company here:					
McIntyre, Deese, Baruch, Panzarella & The new name must be distinguishable and end with "L.L.C."		pany," the designation "LLC" or the abbreviation			
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:					
Name of New Registered Agent:	- Control of the Cont				
New Registered Office Address: 6943 E. Fowler Avenue					
	(Enter Florida street address)				
	Temple Terrace	, Florida <u>33617</u>			
	(City)	(Zip Code)			
New Registered Agent's Signature, if changing Re	egistered 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 608, 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 Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma MGRM = N	nager Nanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<del></del>			Add Remove
			Add
			Remove
			Add Remove
			Add Remove
<del></del>			Add Remove
			Add Remove
D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.	<del></del> )
_			<del></del>
Dated April	117 , 2008	3	
	Signature of a member Richard J. McIntyre	er or authorized representative of a member	
	Typec	d or printed name of signee	

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Filing Fee: \$25.00