L060000111485

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL
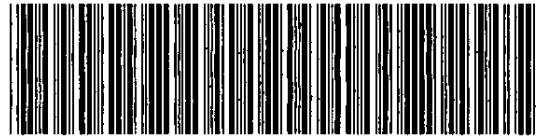
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

M. THOMAS

AUG - 5 2008

EXAMINER

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, Panzarella, Thanasides & Eleff, 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 ☐$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

McIntyre, Panzarella, Thanasides & Eleff, P.L.
(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 _11/16/2006_ and assigned

Florida document number L06000111485 _____.

This amendment is submitted to amend the following:

A. If amending name, <u>enter the new name of the limited liability company here</u>:

McIntyre, Panzarella, Thanasides & Eleff, P.L.
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered agent and/or the new registered office address here</u>:

Name of New Registered Agent: _____

New Registered Office Address: _____
(Enter Florida street address)

_____, **Florida** _____
(City)   *(Zip Code)*

<u>New Registered Agent's Signature, if changing Registered Agent</u>:

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, <u>Signature of New Registered Agent</u>)

Page 1 of 2

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:
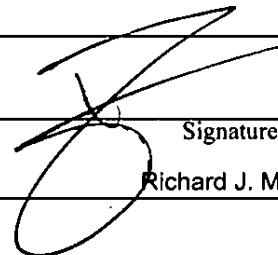
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	☐ Add ☐ Remove
_____	_____	_____	☐ Add ☐ Remove
_____	_____	_____	☐ Add ☐ Remove
_____	_____	_____	☐ Add ☐ Remove
_____	_____	_____	☐ Add ☐ Remove
_____	_____	_____	☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

_____

_____

_____

_____

_____

Dated August 1 _____, 2008 _____

_____
Signature of a member or authorized representative of a member

Richard J. McIntyre
_____
Typed or printed name of signee

Page 2 of 2

Filing Fee: $25.00