

LO7000012470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

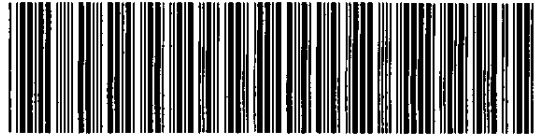
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300112776513

12/06/07---01042---003 \*\*25.00

FILED  
07 DEC -6 AM 10:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DB  
12/6

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Lake Investigation Agency, 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:

Robert H. Pfister  
(Name of Person)

Lake Investigation Agency, LLC  
(Firm/Company)

107 W. Main Street, Suite 2  
(Address)

TAVARES, FL 32378  
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert H. Pfister at (352) 552-3023  
(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

**FILED**  
07 DEC - 6 AM 10:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Lake Investigation Agency, LLC  
(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 02-01-2007 and assigned document number L07 000612470

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

① To change the principal address to hereby be known as: 107 W. Main St, Suite 2, Tavares, FL 32778.

② change Registered Agent Name & Address to hereby be known as: Robert H. Pfister, Suite 2, 107 W. Main Street, Tavares FL 32778.

③ To change the manager/member Detail to hereby be known as: Robert H. Pfister, 107 W. Main Street, Suite 2, Tavares FL 32778

Dated Dec. 5, 2007

Robert H. Pfister

Signature of a member or authorized representative of a member

Robert H. Pfister

Typed or printed name of signee

**FILED**  
07 DEC -6 AM 10:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA