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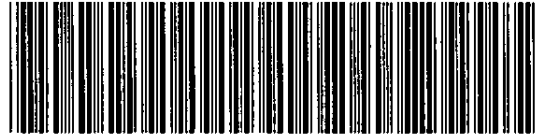
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TALLAHASSEE, FLORIDA

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M. THOMAS

SEP 29 2008

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Sugerman, Zamir and Associates, 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:

Melody Zamir

(Name of Person)

(Firm/Company)

14931 E Falcons Lea Drive

(Address)

Davie, FL 33331

(City/State and Zip Code)

For further information concerning this matter, please call:

Melody Zamir

(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)

*Check has already
been sent*

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 SEP 29 PM 2:54

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 28, 2008

MELODY ZAMIR
14931 E FALCONS LEA DR.
DAVIE, FL 33331

SUBJECT: SUGERMAN, ZAMIR AND ASSOCIATES, LLC
Ref. Number: L07000018926

We have received your document for SUGERMAN, ZAMIR AND ASSOCIATES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas
Regulatory Specialist II

Letter Number: 308A00033393

SECRETARY OF STATE
TALLAHASSEE
FLORIDA

08 SEP 29 PM 2:56

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

Sugerman, Zamir and Associates, 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 February 20, 2007 and assigned Florida document number L07000018926.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Melody Zamir Parent Advocate, LLC

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:

14931 E Falcons Lea Drive

(Principal office address MUST BE A STREET ADDRESS)

Davie, FL 33331

Enter new mailing address, if applicable:

14931 E Falcons Lea Drive

(Mailing address MAY BE A POST OFFICE BOX)

Davie, FL 33331

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:

Melody Zamir

New Registered Office Address:

14931 E Falcons Lea Drive

(Enter Florida street address)

Davie

(City)

Florida 33331

(Zip Code)

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 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.

Melody Zamir
(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 = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Sheryl Sugerman	3847 Treetop Dr Weston, FL 33332	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated _____, _____.

Melody Zamir
Signature of a member or authorized representative of a member
Melody ZAMIR
Typed or printed name of signee

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA