## L07000031598

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**EXAMINER** 

## **COVER LETTER**

TO: Registr

Registration Section
Division of Corporations

SUBJECT

RS TAX & BOOKKEEPING, 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:

Susan Rose

Name of Person

RS Tax Service, LLC

Firm/Company

7601 Kelly Hill Rd

Address

Panama City, FL 32409

City/State and Zip Code

rotaxse@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SUSAN ROSE

Name of Person

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

(Name of the Limited Liability (A Florida L	Company as it now appears on our recordinited Liability Company)	rds.)
The Articles of Organization for this Limited Liability Co. Florida document number L07000031598	ompany were filed on <u>03/23/2007</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
RS TAX SERVICE, LLC		
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Company," the design	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	(ESS)	
		JAN-2 AHASSE
		RY SEE
Enter new mailing address, if applicable:		To ₹ M
(Mailing address MAY BE A POST OFFICE BOX)		TATE TS
		₽ <b></b>
B. If amending the registered agent and/or registered agent and/or the new registered office address:  New Registered Office Address:		enter the name of the nev
New Registered Office Address:	Enter Florida str	reet address
	Flor	rida
	City	Zip Code

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

DO TAY & BOOKKEEDING LLC

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 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 = Ma MGRM = N	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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	ion, enter change(s) here: (Attach additional sheets, if necessary.)
JANUARY 1	2013
d <u></u>	,
Sue	an Porc
Sign	ature of a member or authorized representative of a member
SUSAN ROSE	
	Typed or printed name of signee

Filing Fee: \$25.00

2013 JAN -2 PH 12: 45
SEGRETARY OF STATE
TALLAHASSE OF STATE