

LD7000036030

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

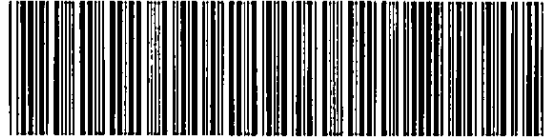
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

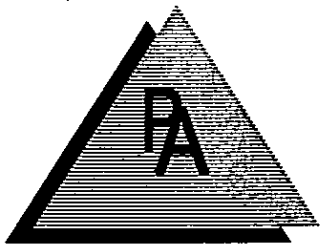


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01/07/19--01027--004 **25.00

JAN 22 2019
S. YOUNG

FILED
19 JAN 22 PM 3:46
TALLAHASSEE, FLORIDA



PROFESSIONAL ADVANTAGE LLC

"YOUR PARTNER IN SUCCESS"

01/18/2019

VIA FEDERAL EXPRESS DELIVERY

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ATTN: Sheila Young

RE: Professional Advantage LLC Articles of Amendment

Dear Ms. Young:

On January 4, 2019, I mailed the above referenced Articles of Amendment with the required filing fee to change our business name and address. Your office received and cashed the check and it cleared my bank on 01/10/2019.

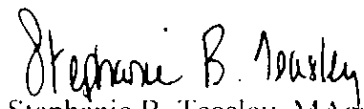
After speaking with two representatives of your office, I found out today that my Amendment had been rejected due to an explanation of the name change was missing from the original Articles of Amendment (copy enclosed). I have enclosed another Articles of Amendment reflecting the purpose of the name change.

I am asking if you could expedite the processing of the Articles of Amendment so I can complete my licensing process, I would greatly appreciate it.

Should you have any questions or require additional information, please call me at 561-602-2718.

Thank you for your consideration and assistance in this matter.

Sincerely,


Stephanie B. Teasley, MAcc

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PROFESSIONAL ADVANTAGE, 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:

STEPHANIE B. TEASLEY
Name of Person

TEASLEY & ASSOCIATES, P.A.
Firm/Company

222 S US Highway One, Suite 205
Address

Sequesta, FL 33469
City/State and Zip Code

Sbtraski@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEPHANIE B. TEASLEY at (561) 602-2718
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input type="checkbox"/> \$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**

PROFESSIONAL ADVANTAGE 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 04/05/2007 and assigned Florida document number LO7000036030.

This amendment is submitted to amend the following:

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

Teasley + Associates, P.A.

The new name must be distinguishable and contain 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)

222 U.S. Highway One, Suite 205
Tequesta, FL 33469

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
19 JAN 22 PM 3:55
TALLAHASSEE, FLORIDA

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:

New Registered Office Address:

Enter Florida street address

Florida

City

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------|----------------|---------------------------------|
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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| | | | <input type="checkbox"/> Change |

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

Business changed to an accounting professional office.

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated 1/3/19

Stephanie B. Teasley

Signature of a member or authorized representative of a member

STEPHANIE B. TEASLEY

Typed or printed name of signee