

L07000064009

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

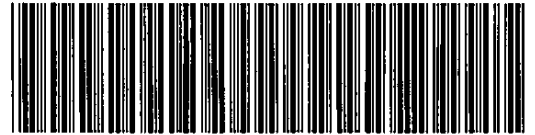
(Business Entity Name)

(Document Number)

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2014 SEP 29 PM 3:21
CLERK OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
OCT -1 2014



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 10, 2014

JEFFREY MANTEN
11900 BISCAYNE BLVD.
SUITE 304B
NORTH MIAMI BEACH, FL 33181

SUBJECT: MANTEN LITIGATION SUPPORT GROUP, P.L.
Ref. Number: L07000064009

We have received your document for MANTEN LITIGATION SUPPORT GROUP, P.L. and your check(s) totaling \$35.00. 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 or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 914A00019386

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Manten Litigation Support Group, PLLC
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:

JEFFREY MANTEN

Name of Person

Manten Litigation Support Group, PLLC

Firm/Company

11900 Biscayne Blvd Suite 304B

Address

North Miami, FL 33181

City/State and Zip Code

jmanten@mantenlitigation.com

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

For further information concerning this matter, please call:

JEFFREY MANTEN

Name of Person

at (305) 815-5003

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

Manten Litigation Support Group, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 6/18/07 and assigned
Florida document number L000064009 #L07000064009

This amendment is submitted to amend the following:

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

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)

11900 Biscayne Blvd. Suite 304B
North Miami, FL 33181

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, 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager and Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

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TALLAHASSEE, FLORIDA


<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated September 26, 2014, _____.



Signature of a member or authorized representative of a member
SERGEY MANTEN

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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