Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000065345 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name . : GOLDBERG BATES, PLLC

Account Number : I20070000134

Phone : (407)893-3776 Fax Number : (407)893-3779

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

GOLDBERG BATES, PLLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

3/13/2008

GOLDBERG&BATES, PLLC

08 MAR 13 AM 8:31 ARTICLES OF AMENDMENT

TO SECRETARY OF STATE ARTICLES OF ORGANIZATION TALL AHASSEE FLORIDA OF

Goldberg Bates, PLLC		
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on our ida Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liability	ty Company were filed on June 19.	2007 and assigned
Florida document number <u>L07000064315</u>		
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
Bates Mokwa, PLLC		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the	designation "LLC" or the abbreviation
B. If amending the registered agent and/or re registered agent and/or the new registered office : Name of New Registered Agent: New Registered Office Address:	address here:	rida street address)
	, Florida	
-	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered age the provisions of all statutes relative to the prope accept the obligations of my position as registered being filed to merely reflect a change in the registerm company has been notified in writing of this change.	ent and agree to act in this capacity, r and complete performance of my a d agent as provided for in Chapter t	luties, and I am familiar with and
	(If Changing Registered Agent, Signa	ture of New Registered

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>	Name	Address	Type of Action
MGRM	Scott M. Goldberg	6996 Piazza Grende Ave., Suite 309 Odando, Fl. 32835	Add Remove
			Add Remove
			Add Remove
·	,		Add Remove
			Add Remove
			Add
D. If amend	ing any other information, enter c	hange(s) here: (Attach additional sheets, if necessary.)	
		TALLAH	OS MAR
Dated Marci	h 13	Sy cu	5 W
-		- wonder	AH 8: 31
	,,	/ped or printed name of signee	

Filing Fee: \$25.00