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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: JOHNSON FINANCIAL SOLUTIONS 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:

## HARRIETT L. JOHNSON

(Name of Person)

JOHNSON FINANCIAL SOLUTIONS LLC

(Firm/Company)

## 1895 ANDOVER STREET NORTHWEST

(Address)

PALM BAY, FLORIDA 32907

(City/State and Zip Code)

For further information concerning this matter, please call:

## HARRIETT L. JOHNSON

(Name of Person)

at 321, 574-5774

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &  
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\$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

\$60.00 Filing Fee,  
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(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**

## JOHNSON FINANCIAL SOLUTIONS LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on October 3, 2007 and assigned document number L07000100670.

**SECOND:** This amendment is submitted to amend the following:

#### **Amendment to the Capital Contributions of the current Members Harriett L. Johnson and Earl S. Johnson II.**

The changes are as follows: Harriett L. Johnson will change from \$51.00 to \$85.00 and Earl S. Johnson II will go from \$49.00 to \$15.00.

This is a correction to the original Certificate Register and Membership list of Johnson Financial Solutions LLC and is agreed to by all members.

Dated December 11, 2007

Harriett L. Johnson  
Signature of a member or author

Signature of a member or authorized representative of a member

Harriett L. Johnson

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**Filing Fee: \$25.00**