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(Re	questor's Name)	
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(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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08 JUN 30 AH II: 35
SECRETARY OF STATE

JUL - 1 2008

COVER LETTER

Division of Co	rporations		
SUBJECT: Frank N	Nagy Financial Servi	ices. LLC	
SUBJECT. ITALIA		ited Liability Company)	<u> </u>
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Frank Nagy	(Many of Parage)	
		(Name of Person)	
		(Firm/Company)	
	36181 East Lake Rd. Su	ite 203	
		(Address) ,	
	Palm Harbor, FL 34685		
		(City/State and Zip Code)	
For further information of	concerning this matter, please c	all:	
Frank Nagy		at (727 ₎ 502-7549	
(Name	of Person)	(Area Code & Daytime T	Celephone Number)
Enclosed is a check for the	he 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:

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Registration Section

TO:

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

08 JUN 30 AM 11: 35
SECRETARY OF STATE
ALLAHASSEE FLORIDA

Frank Nagy Financial Services, 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 Lia		were filed on January 2	26, 2006 and assigned
Florida document number <u>LO.7000</u>	114756		
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company," tl	ne designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		36181 East Lake Rd. Suite 203	
(Principal office address MUST BE A STREET ADDRESS)		Palm Harbor, FL 34685	
Enter new mailing address, if applicable:		36181 East Lake Rd. Suite 203	
(Mailing address MAY BE A POST OFFICE BOX)		Palm Harbor, FL 346	85
B. If amending the registered agent and/o registered agent and/o the new registered off Name of New Registered Agent: New Registered Office Address:	ice address her	ake Rd. Suite 203	
	Palm Harbor	(Enter F	lorida street address)
	i dilli ridibul	(City)	, Florida 34685 (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 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Mana MGRM = Ma	ager anaging Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
	***************************************		Add Remove
			Add Remove
			Add Remove
D. If amendin	ng any other information, enter cha	nge(s) here: (Attach additional sheets, if necessary)	OB JUN 30 AM II: 35
Dated June 26	3 J. , 2009	Manager	-
_	Signature of a mem	or authorized representative of a member	
-	Frank Nagy Type	ed or printed name of signee	

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Filing Fee: \$25.00