

L08000002568

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

SEP - 8 2008

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BRICK CONSULTING LIMITED LIABILITY COMPANY BRICK CONSULTING LIMITED
(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:

MERRILL J. Brick

(Name of Person)

BRICK CONSULTING LIMITED LIABILITY COMPANY

(Firm/Company)

5500 Kingswood Dr

(Address)

Orlando, FL 32810

(City/State and Zip Code)

For further information concerning this matter, please call:

MERRILL J. Brick

(Name of Person)

at (407) 645-1737

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

08 SEP -5 PM 4:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 27, 2008

MERRILL J BRICK
5500 KINGSWOOD DR
ORLANDO, FL 32801

SUBJECT: BRICK CONSULTING LIMITED LIABILITY COMPANY
Ref. Number: L08000002568

We have received your document for BRICK CONSULTING LIMITED LIABILITY COMPANY. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return 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) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 208A00047687

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BRICK CONSULTING LIMITED LIABILITY COMPANY

(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 01/04/2008 and assigned
Florida document number L08000002568.

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)

5500 Kingswood Dr

Orlando, FL 32810

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5500 Kingswood Dr

Orlando, FL 32810

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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:

MERRILL J. Brick

New Registered Office Address:

5500 Kingswood Dr

(Enter Florida street address)

Orlando

(City)

Florida 32810

(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 Changing Registered Agent, Signature of New Registered Agent)

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Sherry Brick	5500 Kingswood Dr Orlando, FL 32810	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	MERRILL J. Brick II	5500 Kingswood Dr Orlando, FL 32810	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Monica Brick Star	5500 Kingswood Dr Orlando, FL 32810	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	MERRILL J. Brick	5500 KINGSWOOD DR Orlando, FL 32810	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated 8/16, 2008

Merrill J. Brick
Signature of a member or authorized representative of a member
MERRILL J. BRICK
Typed or printed name of signer