

L080000014226

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

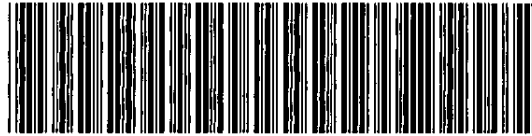
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100120944041

03/24/08--01037--005 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 MAR 24 PM 1:05

Ames

B. Tadlock MAR 26 2008

DAVIS & KIRSTE

ATTORNEYS AND COUNSELORS AT LAW

803 EAST DIXIE AVENUE
LEESBURG, FL 34748-6013

HUGH A. DAVIS II
M. MEREDITH KIRSTE

TELEPHONE
(352) 326-3455

FAX
(352) 365-0055

March 19, 2008

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: TARA CONSULTING FIRM, LLC

Dear Sir or Madam:

Enclosed for filing is Articles of Amendment. Also enclosed is a check in the amount of \$25.00, representing the filling fee.

If you have any questions, please contact me.

Sincerely yours,



Teresa L. Comeau
Legal Assistant to
M. Meredith Kirste

Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TARA CONSULTING FIRM, 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:

M. Meredith Kirste
(Name of Person)

Davis & Kirste
(Firm/Company)

803 East Dixie Avenue
(Address)

Leesburg, FL 34748
(City/State and Zip Code)

For further information concerning this matter, please call:

M. Meredith Kirste at (352) 326-3455
(Name of Person) (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**

TARA CONSULTING FIRM, LLC

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

08 MAR 24 PM 1:08
SECRETARY OF STATE
DIVISION OF CORPORATIONS

The Articles of Organization for this Limited Liability Company were filed on February 7, 2008 and assigned
Florida document number L08000014226.

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."

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:

9442 County Road 125C

(Enter Florida street address)

Wildwood

(City)

Florida 34785

(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:

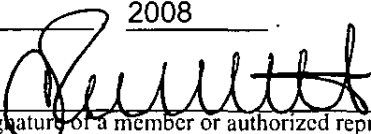
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input 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.)*

Principal address, mailing address, address of resident agent and managing member to be changed to: 9442 County Road 125C, Wildwood, FL 34785

Dated March 12th 2008


Signature of a member or authorized representative of a member

Maria F. Northcott

Typed or printed name of signee