## L08000014253

(R	Requestor's Name)		
(A	ddress)		
(A	ddress)		
(C	city/State/Zip/Phone #	)	
PICK-UP	☐ WAIT	MAIL	
(B	usiness Entity Name)		
(D	ocument Number)		
Certified Copies	Certificates of	Status	
Special Instructions to Filing Officer:			
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S. HAWKES

MAY 0 3 2010

EXAMINER

## **COVER LETTER**

TO: Registration S  Division of Co				
SUBJECT:	Legal C	onsulting, P.L.		
SUBJECT:		ted Liability Company		
	Amendment and fee(s) are sub ondence concerning this matter	-		
		Hal Anderson		
		Name of Person		
	Legal Consulting P.L. Firm/Company			
		300 E. Oakland Pk Blvd Address		
	Oi	akland Park, FL 33334		
		City/State and Zip Code		
	hal.ande E-mail address: (	rson@legalconsultingpl.cor to be used for future annual report notifi	n cation)	
For further information	concerning this matter, please o	eall:		
Hal Anderson			3830742	
Name	of Person	Area Code & Daytimo	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/COURI Registration Section Division of Corpora Clifton Building	n ations	
		2661 Executive Cer Tallahassee, FL 32		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Legal	Consulting, P.L.		
( <u>Name of the Limited Liability</u> (A Florida l	Company as it now appear	rs on our records.	14 PM
(A Florida I	Similed Diability Company)		E 3 7
The Articles of Organization for this Limited Liability C	Company were filed on	02/08/2008	and assigned
Florida document number L08000014253	·		100 B
	<del>_</del>		5. C. C.
			OF US
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company her	re:	7
	Consulting P.L.		
The new name must be distinguishable and end with the wor	<u> </u>	any " the designation	"I I C" or the abbreviation
"L.L.C."	ds Ennied Liability Compa	ary, the designation	ELC Of the aboveviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	RESS)		
	<del> </del>		
	<del></del>	<del></del>	10 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Enter new mailing address, if applicable:		<del> </del>	
(Mailing address MAY BE A POST OFFICE BOX)			·
	<del></del>		- · · · ·
B. If amending the registered agent and/or regist	tered office address on (	our records, enter	the name of the new
registered agent and/or the new registered office add		, <u>, , , , , , , , , , , , , , , , , , </u>	
Name of New Registered Agent:			
Name of New Registered Agent.	<del> </del>		
New Registered Office Address:			
	En	iter Florida street a	ddress
		. Florida	
<del></del>	City		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 = Manager

MGRM = N	MGRM = Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action		
···········			Add		
			Remove -		
			SEE OF THE O		
	***************************************		Themoves		
			Add		
<del> </del>			Remove		
			Remove		
D. If amen	ding any other information, e	nter change(s) here: (Attach additional sheets, if ne	ecessary.)		
<del></del>			<del>, , , , , , , , , , , , , , , , , , , </del>		
Dated	April 20	, <u>2010</u> . $\wedge$			
	Signature (	of a member or authorized representative of a member	Andrew Constitution		
		Hal Anderson			
		Typed or printed name of signee			

Page 2 of 2

Filing Fee: \$25.00