

L08000021981

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

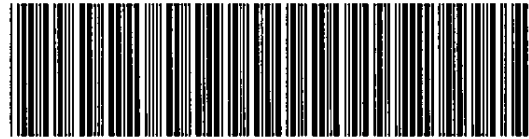
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

operating agreement

Office Use Only



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10/27/17--01015--018 **25.00

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2017 DEC 11 PM 4:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
DEC 11 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Access Interpreting Services, 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:

Tobin Trahan
Name of Person

Access Interpreting Services, LLC
Firm/Company

PO Box 18654
Address

Tampa, FL 33679-8654
City/State and Zip Code

accessinterpreting@outlook.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tobin Trahan at (727) 483-7229
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

Access Interpreting Services, LLC
(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 02/29/2008 and assigned
Florida document number L08000021981

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 contain 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) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

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: _____

Enter Florida street address

_____, Florida

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized 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"/> Change
			<input type="checkbox"/> Add
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NO
changes

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2011 DEC 11 PM 6:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Change of ownership - ~~Attached~~⁹⁹
as of January 2, 2017 with
Signature.

Golden Dawn Ricketts owns 51% of
Access Interpreting Services, LLC
and

Tobin Trahan owns 49% of
Access Interpreting Services, LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated 10/25, 2017.

Tobin Trahan

Signature of a member or authorized representative of a member

Tobin Trahan

Typed or printed name of signee



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 30, 2017

ACCESS INTERPRETING SERVICES LLC
TOBIN TRAHAN
P.O. BOX 18654
TAMPA, FL 33679-8654

SUBJECT: ACCESS INTERPRETING SERVICES LLC
Ref. Number: L08000021981

We have received your document for ACCESS INTERPRETING SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This department does not file "Operating Agreements". Please make changes on the document provided. I have hi-lited the areas for you.

Please return your document, along with 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) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 517A00021869

RECEIVED
2017 DEC 11 AM 10:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA