

LD80000025763

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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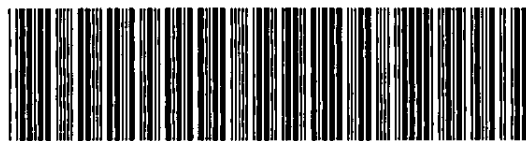
(Business Entity Name)

(Document Number)

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2013 APR - 8 PM 12:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan APR - 9 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: F/V PROVIDER VENTURE 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:

DONALD C ISLEY
Name of Person

Firm/Company

824 BENT CREEK DR
Address

FT. PIERCE, FL 34947
City/State and Zip Code

ISLEYDON @ YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DON ISLEY at (425) 281-8881
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

FILED
2013 APR -8 PM 12: 52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

F/V PROVIDER VENTURE L.L.C.

(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 MARCH 11, 2008 and assigned Florida document number LO8000025763

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)

824 BENT CREEK DR
FT. PIERCE FL 34947

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

824 BENT CREEK DR.
FT. PIERCE FL. 34947

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:

824 BENT CREEK DR

Enter Florida street address

FT. PIERCE

City

Florida

34947

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

MGR = Manager
MGRM = Managing Member

[illegible]

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

Dated 4/4, 2013.

Betty C. Nutt

Signature of a member or authorized representative of a member

BETTY C NUTT

Typed or printed name of signee

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Filing Fee: \$25.00

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