

LD8000038757

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

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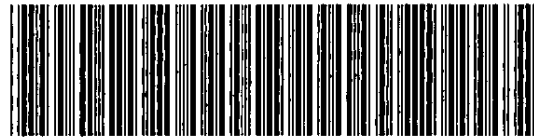
Special Instructions to Filing Officer:

L. SELLERS

AUG 11 2008

EXAMINER

Office Use Only



800132941968

07/16/08--01034--005 \*\*52.50

FILED  
08 AUG -8 AM 8:03  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PSG Associates, 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:

Sharlene R. Pearson  
(Name of Person)

PSG Associates, LLC  
(Firm/Company)

365 Sarasota Center Blvd. #A1  
(Address)

Sarasota, FL 34240  
(City/State and Zip Code)

For further information concerning this matter, please call:

Sharlene Pearson at (941) 342-7504  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

July 17, 2008

SHARLENE R. PEARSON  
365 SARASOTA CENTER BLVD., #A1  
SARASOTA, FL 34240

SUBJECT: PSG ASSOCIATES, LLC  
Ref. Number: L08000038757

We have received your document for PSG ASSOCIATES, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a limited partnership, but your entity is a limited liability company. Please complete and return the enclosed blank form(s).

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) 245-6967.

Leslie Sellers  
Regulatory Specialist II

Letter Number: 508A00041908

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

PSG Associates, LLC

(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 4/17/08 and assigned  
Florida document number L08000038757.

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)

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:

Gerald J. Fleming

New Registered Office Address:

7553 Jennifer Drive

(Enter Florida street address)

Port Charlotte

(City)

Florida

33981

(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.

Gerald J. Fleming  
(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	Gerald J. Fleming	365 Sarasota Center Blvd #A1 Sarasota, FL 34240	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Patrick D. Hall	365 Sarasota Center Blvd #A1 Sarasota, FL 34240	<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
			<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.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated

8/4/08

*Gerald J. Fleming*

Signature of a member or authorized representative of a member

Gerald J. Fleming

Typed or printed name of signee

FILED  
08 AUG - 8 AM 8:03  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA