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QUINNELL • ELDERLAWFIRM

MAIN OFFICE:

913 GULF BREEZE PARKWAY, SUITE 8 HARBOURTOWN GULF BREEZE, FL 32561 (850) 432-4386 PO BOX 125 GULF BREEZE, FL 32562-0125

PENSACOLA BRANCH OFFICE: 3298 SUMMIT BLVD., SUITE 8A JEFFERSON PARK PENSACOLA, FL 32503 (850) 444-8190

ALSO BY APPOINTMENT IN:

- -CRESTVIEW, FL 660-A N. FERDON BLVD
- -MIRAMAR/DESTIN, FL GRAND BLVD.

- -NURSING HOME MEDICAID
- -WILLS, TRUSTS & ESTATES
- -SPECIAL NEEDS TRUSTS; SETTLEMENTS
- -GUARDIANSHIPS
- -PROBATE COURT

STEVEN E. QUINNELL, ATTORNEY*

*BOARD-CERTIFIED SPECIALIST IN ELDER LAW
BY THE FLORIDA BAR

EMAIL: SQUINNELL@QLAWFLORIDA.COM

STEPHANIE Q. NAYLOR, ATTORNEY*

*ALSO LICENSED IN ALABAMA

EMAIL: SNAYLOR@QLAWFLORIDA.COM

2018

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

Re:

Paul R. Lavallee, deceased Date of Death: March 7, 2018

SSN: ****0131

Dear Ladies and Gentlemen:

Enclosed for your filing is:

- Amendment of Article BFE Payroll LLC
- 2. Check for \$25.00
- Amendment of Article of PRL #2 LLC
- Check for \$25.00.

Wil you please send confirmation of the amendments to my office? If you have any questions or concerns regarding this matter please feel free to contact my office Thank you.

Sincerely.

STEPHANIE O NAVI OF

SQN/hd Enclosure

cc: Debra C. Lavallee

STEVEN E. QUINNELL, LLC

QLAWFLORIDA.COM • EFAX TOLL-FREE: (877) 829-6329

COVER LETTER

	Registration Se Division of Cor			
elib ir c	PRL #2, LL	.c		
SUBJEC	.1:	Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please ret	turn all correspo	ndence concerning this matter	to the following:	
		STEPHANIE Q. NAYLOR	₹	
			Name of Person	
-		QUINNELL ELDER LAW	/ FIRM	
			Firm/Company	
•		3298 SUMMIT BLVD., ST	ГЕ. 8А	
			Address	
		PENSACOLA, FL 32503		
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notific	ation)
For furthe	er information co	oncerning this matter, please ca	all:	
STEPHA	NIE Q. NAYLO	OR .	850 432-4386 EXT	2
-	Name o	f Person	Area Code Daytime T	Felephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	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:

TO:

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

PRL #2, 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 MAY 20, 2008 and assigned Florida document number L08000050189 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: DEBRA C. LAVALLEE Name of New Registered Agent: 3191 WEST NINE MILE ROAD New Registered Office Address: Enter Florida street address , Florida 32534
Zip Code PENSACOLA

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.

City

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>	Address	Type of Action
AMBR	DEBRA C. LAVALLEE	751 HOLSBERRY PLACE	■ Add
		PENSACOLA, FL 32534	□ Remove
			Change
			Add
-			☐ Remove
-			Change
			Add
			□ Remove
			Change
			Add
			□ Remove
			☐ Change
			□ Add
			□ Remove
			☐ Change
			
			□ Remove
			☐ Change

The new LLC paperwork should show	w PAUL R. LAVALLEE and	i DEBRA C. LAVALLEE :	is Managing Members
of PRL #2, LLC.			
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ctive date, if other than the date o	March 3, 2018	(or	otional)
effective date is listed, the date must be spece: If the date inserted in this block doe iment's effective date on the Department.	cific and cannot be prior to date or es not meet the applicable sta	of filing or more than 90 days at	ter filing.) Pursuant to 60
ecord specifies a delayed effec e 90th day after the record is		ffective time, at 12:01	l a.m. on the ear
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x Paul R.	taialla by	Pupua Co	avaleu

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Filing Fee: \$25.00