

L080000075968

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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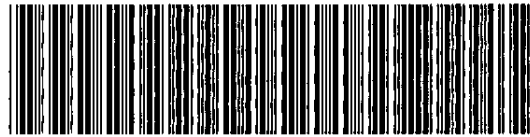
(Business Entity Name)

(Document Number)

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08/18/11--01008--016 **25.00

FILED
11 AUG 18 PM 12:00
SOUTH DAKOTA
FALL RIVER, FLORIDA

B. BOSTICK
AUG 19 2011
EXAMINER

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: Howard H. Ellzey, P.L.
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:

Howard H Ellzey

Name of Person

Ellzey & Hilliard, P.L.

Firm/Company

5420 Central Avenue

Address

St Petersburg, FL 33707

City/State and Zip Code

howardellzey@howardellzey.com

E-mail address: (to be used for future annual report notification)

FILED
11 AUG 18 PM 12:00
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Howard H. Ellzey

Name of Person

at (727)

623-0972

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**

Howard H. Ellzey, P.L.

(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 8/7/2008 and assigned
Florida document number L08000075968.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Ellzey & Hilliard, P.L.

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)

5420 Central Avenue

St Petersburg, FL 33707

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5420 Central Avenue

St Petersburg, FL 33707

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 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

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	Howard H. Ellzey	5420 Central Avenue St Petersburg, FL 33707	<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Jackson Hilliard	5420 Central Avenue St Petersburg, FL 33707	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

The purpose for which this Limited Liability Company is organized is:

TO PROVIDE ALL LAWFUL SERVICES ALLOWED TO BE PROVIDED BY A
PROFESSIONAL LICENSED ATTORNEY UNDER A PROFESSIONAL LIMITED
LIABILITY COMPANY CONSISTENT WITH THE LAWS OF THE STATE OF
FLORIDA

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

1000 member shares authorized
100 shares issued to Howard H Ellzey
100 shares issued to Jackson Hilliard

Dated

August 12, 2011

Signature of a member or authorized representative of a member

Typed or printed name of signee

FILED
11 AUG 18 PM 12:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA