

LO8000 111664

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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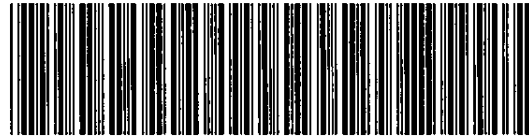
(Business Entity Name)

(Document Number)

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J. Stivers
MILLER, J. L. 11/27/13

J. Stivers DEC 02 2013

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COVER LETTER

**TO: Registration Section
Division of Corporations**

GOAL SEEKERS, LLC

SUBJECT: _____
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:

SUZANNE D. MEEHLE

Name of Person

THE MEEHLE LAW FIRM

Firm/Company

115 MAITLAND AVENUE

Address

ALTAMONTE SPRINGS, FL 32701

City/State and Zip Code

SUZANNE@MEEHLE.COM

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

For further information concerning this matter, please call:

WALTER MAGIERA

407 448-6000

Name of Person

at ()

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**

GOAL SEEKERS, 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 DECEMBER 5, 2008 and assigned
Florida document number L08000111664.

This amendment is submitted to amend the following:

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

POINT B LLC

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: SUZANNE D. MEEHLE, ESQ.

New Registered Office Address: 115 MAITLAND AVENUE

Enter Florida street address

ALTAMONTE SPRINGS, Florida 32701

City

Zip Code

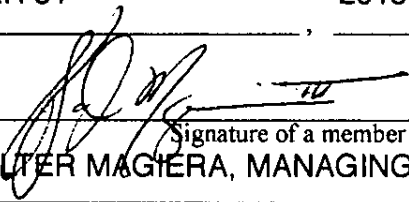
New Registered Agent's Signature, if changing Registered Agent:

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.

[Signature]
If Changing Registered Agent, Signature of New Registered Agent

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

Dated OCTOBER 31, 2013



Signature of a member or authorized representative of a member
WALTER MAGIERA, MANAGING MEMBER

Typed or printed name of signee

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Filing Fee: \$25.00

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FILED
CLERK OF COURT
JUDICIAL DISTRICT OF ILLINOIS
CHICAGO, ILLINOIS