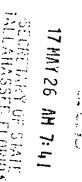


(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
<u> </u>		





05/26/17--01005--007 **25.00



COVER LETTER

Division of Corporations				
SUBJECT:	First Coast Re	ferrals, LLC		
		Name of Limite	ed Liability Company	
The enclosed	Articles of An	nendment and fee(s) are subm	itted for filing.	
Please return	all correspond	ence concerning this matter to	the following:	
		Nanci Soriano		
			Name of Person	<u> </u>
		First Coast Referrals, LLC		
			Firm/Company	
		11701 San Jose Blvd, Ste. 2	1	
			Address	
		Jacksonville, FL 32223		
			City/State and Zip Code	
		nancisoriano@gmail.com		
			be used for future annual report notifica	lion)
For further in	iformation cond	cerning this matter, please call	l :	
Nanci Soriar			904 260-5300 at () Area Code Daytime Te	
	Name of Pe	erson	Area Code Daytime To	elephone Number
Enclosed is a	check for the f	following amount:		
\$25.00 F	iling 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

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

First Coast Referrals, 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 ______ and assigned Florida document number L08000117588 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" 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: New Registered Office Address: Enter Florida street address Florida City 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.

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>	Name	Address	Type of Action		
MGRM	Stanley H Bishop, SR	11701 San Jose Blvd Ste 21	Add		
		Jacksonville, FL 32223	□ Remove		
			Change		
MGRM	Stanley H Bishop, JR	11701 San Jose Blvd Ste 21	Add		
		Jacksonville, FL 32223	Remove		
			Change		
			□ Remove		
			☐ Change		
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ectiv	e date, if other than the date of filing: (option live date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after fi	வி≧		
te: l	the date inserted in this block does not meet the applicable statutory filing requirements, this out's effective date on the Department of State's records.	late will	not be	listed a
reco	rd specifies a delayed effective date, but not an effective time, at 12:01 a. Oth day after the record is filed.	m. on	the ea	arlier c
ed_	May 25th 2017.			
		~		
	Signature of a member or authorized epresentative of a member			-
	Nanci Soriano			

Page 3 of 3

Filing Fee: \$25.00