Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Division of Corporations

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Phone : (239)649-6200

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

SKOLNIK BENEFIT SOLUTUIONS, LLC

## Certificate of Status 1 Certified Copy \*\*\*C Page Count .91\*\*/4 Estimated Charge \$60.00

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2/5/2016

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SKOLNIK BENEFIT SOLUTUIONS, LLC	٠ (ر
(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 12/30/2008	and assigned
Florida document number L08000117633	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
SKOLNIK BENEFIT SOLUTIONS, LLC	
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	r the name of the new
registered agent and/or the new registered office address bere:	

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

Name of New Registered Agent:

New Registered Office Address:

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 flied 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.

419 B. OAKLAND AVENUE

City

ERIK SKOLNIK

ORLANDO

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

Florida <u>34787</u>

Page 1 of 3

If amending 1800001340 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

Title	<u>Name</u>	Address	Type of Action
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d February 5	2016	·		
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	gnature of a member or author			

Page 3 of 3

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