

L 09000031951

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

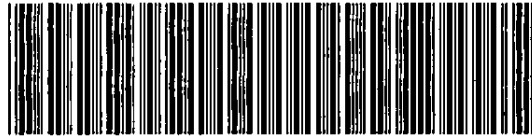
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000176992650

04/23/10--01056--013 \*\*25.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 APR 23 AM 8:13

B. KOHR

APR 27 2010

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: EEL Servicing, LLC**  
Name of Limited Liability Company

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 APR 23 AM 8:13

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Darin Wade Mellinger, Esquire**  
Name of Person

**Darin Wade Mellinger, P.A.**  
Firm/Company

**1200 North Federal Highway, Suite 200**  
Address

**Boca Raton, Florida 33432**  
City/State and Zip Code

**eisenband@364care.com**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Darin Wade Mellinger, Esquire** at ( **561** ) **210-8570**  
Name of Person 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**

**EEL Servicing, LLC**

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 APR 23 AM 8:13

The Articles of Organization for this Limited Liability Company were filed on April 2, 2009 and assigned

Florida document number L09000031951M.

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 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:

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	Michael Eisanband	6113 Wilbur Way Lake Worth, Florida 33467	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Robert Eisanband	1730 Lazy River Lane Atlanta, Georgia 30350	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Michael Eisenband	6113 Wilbur Way Lake Worth, Florida 33467	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Robert Eisenband	1730 Lazy River Lane Atlanta, Georgia 30350	<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

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

---



---



---



---



---

Dated April 8, 2010

\_\_\_\_\_  
Signature of a member or authorized representative of a member  
Michael Eisenband  
\_\_\_\_\_  
Typed or printed name of signee

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

Title	Name	Address	Type of Action
MGRM	Michael Eisenband	6113 Wilbur Way Lake Worth, Florida 33467	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Robert Eisenband	1730 Lazy River Lane Atlanta, Georgia 30350	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Michael Eisenband	6113 Wilbur Way Lake Worth, Florida 33467	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Robert Eisenband	1730 Lazy River Lane Atlanta, Georgia 30350	<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

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

Dated April 8, 2010

 MGRM  
Signature of a member or authorized representative of a member

Michael Eisenband  
Typed or printed name of signee