

L09000054042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

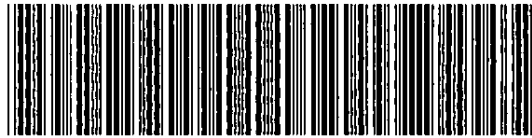
(Business Entity Name)

(Document Number)

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09 AUG 24 PM 12:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S. HAWKES

AUG 25 2009

EXAMINER

S. HAWKES

~~AUG 10 2009~~

EXAMINER

*[Handwritten signature]*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 10, 2009

CANDACE ROSS  
11450 INTERCHANGE CIRCLE NORTH  
MIRAMAR, FL 33025

SUBJECT: SIMON & BOCKSCH DEBT SETTLEMENT GROUP LLC  
Ref. Number: L09000054042

We have received your document for SIMON & BOCKSCH DEBT SETTLEMENT GROUP LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes  
Regulatory Specialist II

Letter Number: 309A00027274

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Simon + Bocksch Debt Settlement Group LLC  
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:

Jennifer Loving  
Name of Person

Simon + Bocksch Debt Settlement  
Firm/Company

1001 Brickell Bay Dr. Ste 1200  
Address

Miami FL 33131  
City/State and Zip Code

gelber01@bellsouth.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jennifer Loving at (305) 375-6500  
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

Simon + Bocksch Debt Settlement Group 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 June 1, 2009 and assigned  
Florida document number LO90000054042

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09 AUG 24 PM 12:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

City, Florida 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	Rochelle Renee Bocksch	1120 NE 88th Street Miami FL 33138	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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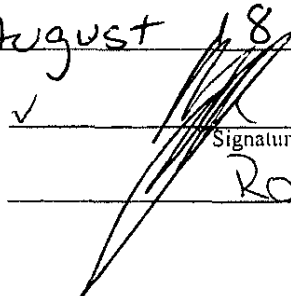
09 AUG 24 PM 12:15  
SECRETARY OF FLORIDA  
ALLAHSSA E. FORDA

FILED

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated ☒ August 18, 2009.

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
Ronald M. Simon  
\_\_\_\_\_  
Typed or printed name of signee