## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FINANCIAL SHENANIGANS DETECTION GROUP, LLC

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Corporate Filing Menu

Help

Electronic Filing Menu

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	NIGANS DETECTION GRO		<u></u>
(Name of the Limited Liability (A Florida I	Company as it now super amited Liability Company)	n on our records.)	
The Articles of Organization for this Limited Liability C	company were filed on	August 4, 2009	and assigned
Torida document number L09000074522	<b>-</b> -		
This amendment is submitted to amend the following:			,
L. If amending name, enter the new name of the limi	ited liability company he	<u>rē</u> t	:
Schillt Forensics LLC			
he new name must be distinguishable and end with the wor LLC."	de "Limited Liability Comp.	sny," the designation "l	LC* or the abbreviation
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Principal office address MUST BE A STREET ADDR	TEREZZI		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
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inter new mailing address, if applicable:		<del></del>	A SA
Mailing address MAY BE A POST OFFICE BOX)		·	338 788 <b>6</b>
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k. H amending the registered agent and/or registered	tered office address on	our records, enter	he name of the new
egistered agent and/or the new registered office add	tom here:		Dry Es
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New Registered Office Address:	:		
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	,	. Florida	
<del></del>	City		Zip Code
ten Registered Agent's Signature, if changing Registere	d Agent:		k
I hereby accept the appointment as registered agent the provisions of all statutes relative to the proper a accept the obligations of my position as registered a being filed to merely reflect a change in the registere company has been notified in writing of this change.	nd complete performance gent as provided for in C ed office address, I heret	of my duties, and I hapter 608, F.S. Or,	om familiar with and If this document is

Page 1 of 3

FLOSS - LVOVOGES Wakes Khowe Onth

If Changing Registered Agent, Signature of New Registered Agent

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Page 2 of 3

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FAX No.

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	other information, enter change(e) here: (Attach additional sheets, (f necessary.)
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	The shelet
-	Signative of a member or suffortized representative of a member Howard Schilit, Manager
	Typed or printed name of signee

Page 3 of 3 Filing Fee: \$25.00

2013 APR 19 MIL: 4