Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000082890 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : JONES, FOSTER, JOHNSTON & STUBBS; ≥P

Account Number: 076077003231

: (561)650-0471

Fax Number

: (561)650-0431

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KEY BROKER SERVICES, LLC

> Certificate of Status 1 Certified Copy Page Count 02 Estimated Charge \$55.00

A. LUNT

MAR 3 n 2011

EXAM

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ney	Bloker Services, LLC, LLC			
(<u>Name of the Limited</u> (A	Liability Company as it now appears of Florida Limited Liability Company)	n our recoras.)		
·				
The Articles of Organization for this Limited Li	ability Company were filed on <u>Nov</u>	ember 16, 200	9 mand assigned	
Florida document numberL09000110	<u>1401</u> ,		20 F	
			THE PERSON	
This amendment is submitted to amend the following:			1 9 C	
A. If amending name, enter the new name of	the limited liability company here:		STATE AND STATE OF THE PARTY OF	
	Retirement Solutions, LLC		. 5,	
The new name must be distinguishable and ond wit		ob a dealers (1)	(Y C" the abbreviation	
"L.L.C."	a the words "Limited Liability Company,	rue designation	LC or the source and	
Enter new principal offices address, if application	able:			
(Principal office address MUST BE A STREE	T ADDRESS)		 -	
				
Enter new mailing address, if applicable:		,		
(Mailing address MAY BE A POST OFFICE	POY	· -		
Mulling united MAT BE A 1051 OF FICE I		<u> </u>		
B. If amending the registered agent and/o	or registered office address on our	records enter t	he name of the new	
registered agent and/or the new registered of		records, once	ac name of the new	
Name of New Registered Agent:	Jones Foster Service, LLC			
New Registered Office Address:	505 South Flagler Drive, Suite	1100		
	Enter Florida street address			
	West Palm Beach	, Florida	33401	
	City		Zip Code	
Nove Designated Assertle Circumstance (Calemating D				

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

Page 1 of 2

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:

nager Ianaging Member		
<u>Name</u>	Address	Type of Action
		Add Remove
		Add Remove
		TRemove 7
		Add Confirmation Remove
		Adding Refflore
		Add Remove
ing any other information, enter chang	ge(s) bexe: (Attach additional sheets, if necessor	ary.)
March 29 , 20	<u>112</u> .	
		
Typed	or printed name of signee	
	Page 2 of 2	
	ing any other information, enter change March 29 20 Signature of a member Larry B. Alexand	Innaging Member Name Address

Filing Fee: \$25.00