L16000037373

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)	1.11	
(Cit	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nai	me)	
(Document Number)			
Certified Copies	_ Certificate:	s of Status	
Special Instructions to Filing Officer:			
	·		

Office Use Only



900181896559

06/10/10--01011--003 **25.00

10 JUN -9 AM 10 C

DIVISION OF CORPORATIONS

B. KOHR
JUN 1 1 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Principal Financial Systems 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:
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: Name of Person
Principal Financial Systems
1924 Burdock DR-
Wirthole Garden Fl. 34767 City/State and Zip Code
· ·
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Cheis Murdock at (407) 802-8940 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$\text{S60.00 Filing Fee, Certified of Status & Certified Copy (additional copy is enclosed)}} \text{\$\text{Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\text{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

Principal Fr	nancial Systems	
(Name of the Limited L (A F	nancial Systems iability Company as it now appears on our rec lorida Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liab Florida document number		010 and assigned
This amendment is submitted to amend the follow	ving:	% &
A. If amending name, enter the new name of the	he limited liability company here:	
The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability Company," the desi	ignation "LLC" or the abbreviation
Enter new principal offices address, if applicab	ele:	
(Principal office address MUST BE A STREET.	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		s, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		lorida
	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> **Address** Type of Action Remove ☐ Add Remove Remove ∏ Add Remove Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated_ Signature of a member or authorized representative of a member A MUVJOCK
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00