

L100000038900

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

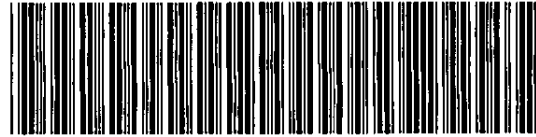
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2013 APR 18 AM 8:32
CLERK OF COURT
TALLAHASSEE, FLORIDA

Law Offices of
JOEL R. LAVENDER, P.A.
507 Southeast 11th Court
Fort Lauderdale, Florida 33316

(954) 522-5101

Fax (954) 523-1221

April 4, 2013

Corporate Records Bureau
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32301

Re: **Articles of Amendment to Articles of Organization for Florida Limited Liability Company-VORTEX PARTNERS, LLC**

Ladies/Gentlemen:

Enclosed please find the original and one (1) copy of Articles of Amendment to Articles of Organization for Florida Limited Liability Company for the above named corporation, along with my check in the amount of \$25.00 for the filing of same. Kindly, return a true copy of said articles.

If you have any questions, please do not hesitate to contact me.

Very truly yours,



JOEL R. LAVENDER

JRL:vab
Enclosures

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CLERK OF THE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

VORTEX PARTNERS, 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 04/12/2010 and assigned
Florida document number L10000038900

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:

Susan L. Lowry

New Registered Office Address:

300 NE 17 Avenue

Enter Florida street address

Fort Lauderdale

, Florida 33301

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	Susan L. Lowry	300 NE 17 Avenue	<input checked="" type="checkbox"/> Add
		Fort Lauderdale	<input type="checkbox"/> Remove
		Florida 33301	
MGRM	Jeffrey Lowry	300 NE 17 Avenue	<input type="checkbox"/> Add
		Fort Lauderdale	<input checked="" type="checkbox"/> Remove
		Florida 33301	
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated April 4, 2013

Signature of a member or authorized representative of a member
SUSAN L. LOWRY Susan L. Lowry
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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