

110000039369

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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D. BRUCE
DEC 06 2016

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GAULER & ASSOCIATES, PLLC

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:

Scott Koval

Name of Person

Florida Counseling and Evaluation Services

Firm/Company

PO Box 54723

Address

Jacksonville, FL 32245

City/State and Zip Code

information@flces.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Koval

904

549-7503

at (_____) _____

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

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TALLAHASSEE, FLORIDA

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

GAULER & ASSOCIATES, PLLC

(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 04/13/2010 and assigned
Florida document number L10000039369.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

GAULER & ASSOCIATES, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

6950 Philips Highway

(Principal office address MUST BE A STREET ADDRESS)

Suite 9 - 12

Jacksonville, FL 32216

Enter new mailing address, if applicable:

PO Box 54723

(Mailing address MAY BE A POST OFFICE BOX)

Jacksonville, FL 32245

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:

Scott Koval

New Registered Office Address:

6950 Philips Highway, Suite 9 - 12

Enter Florida street address

Jacksonville

, Florida

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 605, 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.

 11/30/16
If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	J.L. Clark	6950 Philips Highway, Suite 9 - 12, Jacksonville, FL 32216	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Christiane Ottmann	6950 Philips Highway, Suite 9 - 12, Jacksonville, FL 32216	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

1) Changing from professional services LLC (PLLC) to LLC

2) New statement of purpose: "The purpose of the Limited Liability Company is to engage in any lawful activity for which a Limited Liability Company may be organized in this state."

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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: December 01, 2016 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated 30 November 2016, 2016

 11/30/16
Signature of a member or authorized representative of a member

Scott Koval

Typed or printed name of signee