

L100000041932

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

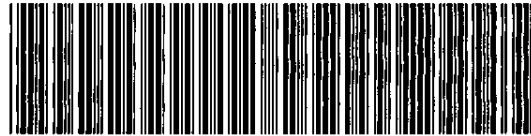
(Business Entity Name)

(Document Number)

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2010 DEC 23 AM 10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE

DEC 27 2010

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: EEBS "Employer Employee Benefit Solutions"  
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:

Tammy Wallace  
Name of Person

EEBS  
Firm/Company

4443 Royal Tern Court  
Address

Jacksonville Beach, FL 32256  
City/State and Zip Code

TammyWallace@EEBSonline.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tammy Wallace at (904) 280-8834  
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

2010 DEC 23 AM 11:10  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301

6. 1. 3.

**(Name of the Limited Liability Company as it now appears on our records.)**  
**(A Florida Limited Liability Company)**

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:

MGR = Manager  
MGRM = Managing Member

Title	Name	Address	Type of Action
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MGR	Thomas L. Wallace, Jr.	4443 Royal Tern Court JACKSONVILLE BEACH, FL 32250	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
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MGR	Tammy L. Wallace	4443 Royal Tern Court JACKSONVILLE BEACH, FL 32250	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

I emailed our change of address, which is listed above.

Dated December 20, 2010

Thomas L. Wallace, Jr. / Tammy L. Wallace  
Signature of a member or authorized representative of a member

Thomas L. Wallace, Jr. / Tammy L. Wallace

Typed or printed name of signee