12100000044022

(Requestor's Name)
(Address)
•
(Address)
(City/State/Zip/Phone #)
(Only/Otate/21p/ Hone #)
PICK-UP WAIT MAIL
•
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:



900191301129

01/18/11--01018--016 **30.00

2011 JAN 18 PH 4: PD

A. LUNT

EXAMINER

JAN 19 2010

Office Use Only

COVER LETTER

TO: Registration Secti Division of Corpo			,		
SUBJECT: Advice Creative Group LLC					
		ited Liability Company			
The enclosed Articles of Ar	nendment and fee(s) are sul	omitted for filing.			
Please return all correspond	lence concerning this matter	r to the following:			
		Darin Karp			
	Name of Person		20 5%		
Advice Creative Group LLC				_	
Firm/Company				2011 JAN 18 Salene Jane Fall AHASS	******
2500 Weston Road Suite 220		20	<u> </u>		
Address					
		Weston Fl 33331			
		City/State and Zip Code		40	
	Si Carall address:	teven@advicecg.com to be used for future annual report	notification)		
For further information con-			notification)		
Da	rin Karp.	at (_954_)	436-1050		
Name of Person		Area Code & Da	aytime Telephone Number	r	
Enclosed is a check for the	-	Filosopa Puli B. A		t T	
\$25.00 Filing Fee	▼ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	losed) Certified	ate of Status &)
Registrati	G ADDRESS: on Section	Registration S			
Division of Corporations P.O. Box 6327		Division of Co Clifton Buildi			

2661 Executive Center Circle Tallahassee, FL 32301

,

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A	dvice Creative Group LLC	2		
(<u>Name of the Limite</u>	d Liability Company as it now appea A Florida Limited Liability Company)	urs on our records.)		
	, ,			
The Articles of Organization for this Limited I	iability Company were filed on	04-26-2010 1 and assigned		
Florida document number L 1000004	8			
		THE 2 WAY		
This amendment is submitted to amend the fol	lowing	5 <u>\$</u> .		
This antenument is submitted to amend the for	lowing.			
A. If amending name, enter the new name of	of the limited liability company he	<u>re</u> :		
The new name must be distinguishable and end w	ith the words "Limited Liability Comp	pany," the designation "LLC" or the abbreviation		
"L.L.C."				
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	ROY)			
Intuing universe may be a rost of red		· · · · · · · · · · · · · · · · · · ·		
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 of				
Name of New Registered Agent:	Steven Menendez			
New Registered Office Address: Enter Florida street address				
	Ditter 1 for the Street dates and			
		, Florida Zip Code		
	City	zip Coae		

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 **Title** <u>Name</u> **Address** Type of Action MGRM Darin Karp 2500 Weston Road ☐ Add ✓ Remove Weston Fl 33331 ☐ Add ☐ Remove ☐ Add Remove Remove Remove B D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) .2010. Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00