## W0000044214

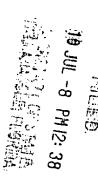
(Re	equestor's Name)	<del>.</del>			
(Ad	dress)				
(Ad	ldress)				
(Cit	ty/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nam	ne)			
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					
		6. '7.			

Office Use Only



500183034255

07/08/10--01022--009 \*\*25.00



S. HAWKES

JUL 8 YUN

**EXAMINER** 

## **COVER LETTER**

TO:

то:	Registration Secti Division of Corpo	on		
SUBJE	CT:	Tax Reducti	on Specialists, LLC	
			ted Liability Company	
The enc	closed Articles of An	nendment and fee(s) are sul	omitted for filing.	1
Please r	eturn all correspond	ence concerning this matter	to the following:	,
				•
			Fredrick T. Locke	,
			Name of Person	· · · ·
		Tax R	deduction Specialists, L	LC ·
			Firm/Company	
		312 8	S. Old Dixie Hwy, Ste 2	09
			Address	
			Jupiter, Fl 33458	·
			City/State and Zip Code	
	٠,	Fernail address: (	duceflatax@gmail.com to be used for future annual report	t notification)
For furt	her information con	cerning this matter, please o	call:	v.
	( 	ale T. I. a alea		744 4700
	Name of Pe	ck T. Locke erson	at ( 561 ) Area Code & Di	744-1733 aytime Telephone Number
Enclose	d is a check for the t	following amount:		
<b>▼</b> \$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	\$60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registration of P.O. Box	G ADDRESS: on Section of Corporations 6327 ce, FL 32314	Registration S Division of C Clifton Buildi	orporations ing ve Center Circle -

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tax Reduction S	oecialists, LL	C			
( <u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appear ability Company)	s'on our records.)	<del>,</del>		
·	• •				
The Articles of Organization for this Limited Liability Company	were filed on	04/24/2010	and assigned		
Florida document numberL10000044214					
This amendment is submitted to amend the following:			0		
A. If amending name, enter the new name of the limited liabi	lity company her	<u>e</u> :			
Tax Reduction Sp	ecialists, LLC				
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Compa	ny," the designation "l	LC" or the abbreviation		
Enter new principal offices address, if applicable:		1			
(Principal office address MUST BE A STREET ADDRESS)		NA			
•		1'			
Enter when address if anyther block	•				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)					
		<u> </u>			
B. If amending the registered agent and/or registered off	ice address on o	our records, enter t	the name of the new		
registered agent and/or the new registered office address here					
Name of New Registered Agent:		NA			
New Registered Office Address:	<u> </u>	, · · · · ·			
	En	ter Florida street add	lress		
	City		Zip Code		
New Registered Agent's Signature, if changing Registered Agent;		1			

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> Name Address Type of Action MGR Fredrick T. Locke 312 S. Old Dixie Hwy, Ste 209 ✓ Add Jupiter, FI 33458 Remove 🚟 🖸 Ädde Remove \_.Add↔ Remove Add Remove □Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 07/07/2010 Dated\_ Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00