

40000053911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

D. BRUCE

AUG 3 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Consumer Legal Network LLC
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:

Lino Figueroa
Name of Person

CONSUMER LEGAL NETWORK LLC
Firm/Company

871 CORONADO CENTER DR. SUITE 200
Address

HENDERSON, NV 89052
City/State and Zip Code

info@CONSUMERLEGALPLANS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LINO FIGUEROA at (800) 295 1774
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 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

\$25

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10 AUG -2 PM 1:09
TALLAHASSEE, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

CONSUMER LEGAL NETWORK 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 5/19/10 and assigned
Florida document number L10000053911

This amendment is submitted to amend the following:

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

CONSUMER LEGAL PLANS LLC

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)

871 Coronado Center Dr
Suite 200
HENDERSON, NV 89052

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

871 Coronado Center Dr
Suite 200
Henderson, NV 89052

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:

Lino Figueira

New Registered Office Address:

701 Brickell Ave

Enter Florida street address

Miami

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 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.

Lino Figueira
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	Name	Address	Type of Action
MGRM	Lino Figueroa	871 Coronado Center Dr Suite 200 Henderson NV 89052	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated

7/28

2010

Signature of a member or authorized representative of a member

LINO FIGUEROA

Typed or printed name of signee

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CLERK OF DISTRICT COURT
JULIA BOSS, CLERK