

L10000067183

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800257280178

03/07/14--01001--001 **25.00

RECEIVED
OFFICE OF THE
CLERK OF THE
SUPREME COURT
2014 MAR - 6 PM 1:58
SUFFICIENCY OF FILING

2014 MAR - 6 PM 1:58

RECEIVED
OFFICE OF THE
CLERK OF THE
SUPREME COURT
2014 MAR - 6 PM 2:20
STATE
OF FLORIDA

14 MAR - 6 PM 2:20

APPROVED
AND
FILED

B. BOSTICK

MAR - 6 2014

EXAMINE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Marozi Group, 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:

Scott W. Maybury
Name of Person

Firm/Company

2500 Merchants Row Blvd., Unit 103
Address

Tallahassee, FL 32311
City/State and Zip Code

maybury212@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Maybury at (954) 662-3041
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

RECEIVED
MAR 14 2014
FILING

14 MAR -6 PM 2:20

APPROVED
AND
FILED

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

The Marozi Group, 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 June 24, 2010 and assigned Florida document number L10000067183.

This amendment is submitted to amend the following:

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

Strategic Claims Investigations, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LL

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2500 Merchants Row Blvd.

Unit 103

Tallahassee, FL 32311

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2500 Merchants Row Blvd.

Unit 103

Tallahassee, FL 32311

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:

Priscilla Bach-Maybury

New Registered Office Address:

2500 Merchants Row Blvd., Unit 103

Enter Florida street address

Tallahassee

Florida

32311

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.

Priscilla Bach-Maybury

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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	Priscilla Bach-Maybury	2500 Merchants Row Blvd	<input checked="" type="checkbox"/> Add
		Unit 103	<input type="checkbox"/> Remove
		Tallahassee, FL 32311	
MGRM	Scott W. Maybury	8801 W. Atlantic Blvd.	<input type="checkbox"/> Add
		#770925	<input checked="" type="checkbox"/> Remove
		Coral Springs, FL 33071	
AMBR	Scott W. Maybury	2500 Merchants Row Blvd.	<input checked="" type="checkbox"/> Add
		Unit 103	<input type="checkbox"/> Remove
		Tallahassee, FL 32311	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

14 MAR -6 PM 2:20
 RECEIVED
 STATE OF FLORIDA

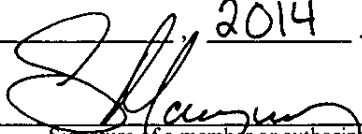
APPROVED
 AND
 FILED

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated March 3, 2014



Signature of a member or authorized representative of a member

Scott Maybury

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

STATE
FLORIDA

14 MAR -6 PM 2:20

APPROVED
FILED