

L10000086737

(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)

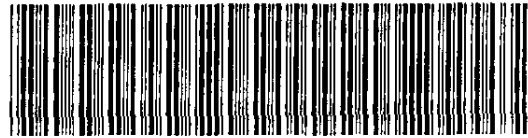
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2011 MAY 12 AM 10 09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE

MAY 16 2011

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Ascendia Group  
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:

Beth Dilley

Name of Person

Ascendia Real Estate

Firm/Company

5127 Ocean Blvd

Address

Sarasota, FL 34242

City/State and Zip Code

beth@ascendiarealestate.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Beth Dilley

Name of Person

at ( 941 )

400-1322

Area Code & Daytime Telephone Number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 MAY 12 AM 10 00

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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

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

Ascendia 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 8/18/2010 and assigned  
Florida document number L10000086737

This amendment is submitted to amend the following:

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

Ascendia Insurance Services, 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)

5127 Ocean Blvd

Sarasota, FL 34242

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5127 Ocean Blvd

Sarasota FL 34242

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2011 MAY 12 AM 10:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:

New Registered Office Address: 5127 Ocean Blvd

*Enter Florida street address*

Sarasota

Florida

34242

*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.*

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

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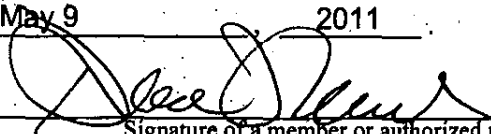
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Dated: May 9, 2011



Signature of a member or authorized representative of a member

David Shepard

Typed or printed name of signee

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2011 MAY 12 AM 10:08  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE