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February 1, 2017

Registration Section
Division of corporations
PO box 6327
Tallahassee FL 32314

In Re: Russo Dental Lab LLC

Dear sir/madam:

Enclosed please find our check #1474, in the amount of \$25.00 together with filing for Articles of Amendment for the above referenced entity.

Sincerely,

DUNLAP & MORAN, PA

By: 

Cathy McKeehan. Paralegal

/cam

Enclosures

File #429-4

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Russo Dental Lab, 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:

Joseph J. Russo
Name of Person
Russo Dental Lab, LLC
Firm/Company
2382 Waldemere St.
Address
Sarasota, FL 34239
City/State and Zip Code
therecenter@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph J. Russo at (941) 928-1613
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

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

Russo Dental Lab, 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 8/23/10 and assigned Florida document number L10000088226

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Enter Florida street address

, 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 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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/ AMBR	Marguerite Russo	4981 Sabal Lake Circle	<input type="checkbox"/> Add
		Sarasota FL 34238	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Joseph J. Russo	# 2382 Waldenice St.	<input checked="" type="checkbox"/> Add
		# Sarasota, FL 34239	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Julia M. Tharp	Julia M Tharp	<input checked="" type="checkbox"/> Add
		16411 Waterline Rd	<input type="checkbox"/> Remove
		Bradenton, FL 34212	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated January 10, 2017.

Signature of a member of _____

Joseph J. Russo
Typed or printed name

Typed or printed name of signee