

**L11000040669**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

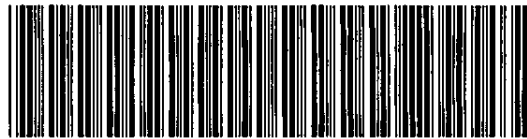
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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**14 JAN 21 PM 1:03**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**8 Burch JAN 28 2014**

*8*

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **Centrone & Shrader, 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:

**Gus Centrone**

Name of Person

**Centrone & Shrader, LLC**

Firm/Company

**1710 N. 19th Street, Suite 205**

Address

**Tampa, FL 33605**

City/State and Zip Code

**gcentrone@centroneshrader.com**

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

For further information concerning this matter, please call:

**Gus Centrone or Brian Shrader** at **813 360-1529**

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**

**Centrone & Shrader, 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 4/5/11 and assigned  
Florida document number L110000040669.

This amendment is submitted to amend the following:

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

**Centrone & Shrader, PLLC**

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)

1710 N. 19th Street

Suite 205

Tampa, FL 33605

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1710 N. 19th Street

Suite 205

Tampa, FL 33605

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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:

**1710 N. 19th Street, Suite 205**

*Enter Florida street address*

**Tampa**

*City*

**Florida 33605**

*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 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	Gus Centrone	14515 Clifty Ct.	<input type="checkbox"/> Add
		Tampa, FL 33624	<input checked="" type="checkbox"/> Remove
MGR	Brian Shrader	14515 Clifty Ct.	<input type="checkbox"/> Add
		Tampa, FL 33624	<input checked="" type="checkbox"/> Remove
MGR	Gus Centrone	1710 N. 19th Street	<input checked="" type="checkbox"/> Add
		Suite 205	<input type="checkbox"/> Remove
		Tampa, FL 33605	
MGR	Brian Shrader	1710 N. 19th Street	<input checked="" type="checkbox"/> Add
		Suite 205	<input type="checkbox"/> Remove
		Tampa, FL 33605	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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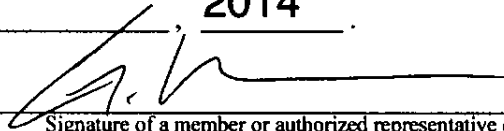
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Amending Article III of the Articles of Organization to reflect that  
the purpose for which this professional limited liability company is  
organized is the authorized practice of law.

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 January 20, 2014



Signature of a member or authorized representative of a member

Gus M. Centrone

Typed or printed name of signee

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