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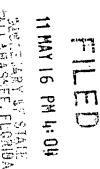
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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D. BRUCE

MAY 17 2011

**EXAMINER** 

# **COVER LETTER**

Division of Co				7	
SUBJECT:	LAWYERF	INDONLINE, LLC			
SUBJECT:		ted Liability Company		· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.	,		
Please return all corresp	oondence concerning this matter	to the following:			
		JACEK SWIATEK	·		
	·	Name of Person		, e Aner	
	LAW	YERFINDONLINE, LLC Firm/Company		A STATE OF THE STA	
		Firm/Company			
	790	63 HEIRLOOM DRIVE		•	
		Address		A) mark	
	PE	NSACOLA, FL 32514 City/State and Zip Code			
	ioos				
	E-mail address: (to	ekswiatek@yahoo.com o be used for future annual report notific	cation)	श्रीह क	1
For further information	concerning this matter, please ca	all:			
	acek Swiatek	at ( 850 ) Area Code & Daytime	207-9315		
rvanie	or reason	Alea Code & Daytille	receptione 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)	) Certified	te of Status &	sed)

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

AWYERFINI	<u>DONLINE, LLC</u>	<i>;</i>	<del> </del>
A Florida Limited	d Liability Company)	rs on our records.)	
<del>-</del>	ny were filed on	04/27/2011	and assigned
llowing:			
of the limited lia	ability company her	<u>e</u> :	
N.	/ <b>A</b>		
ith the words "Li	mited Liability Compa	ny," the designation	"LLC" or the abbreviatio
icable:	Ń/A		
ET ADDRESS)			
			604 5
E BOX)			Me 3 m
			F C
		our records, enter	
onice address no	ere:		
N/A		<del> </del>	
	Ent	ter Florida street ac	ldress
		, Florida _	
	City		Zip Code
	Ed Liability Compared Florida Limited Liability Compared 19717  Illowing:  of the limited liability Notes and the limited liability icable:  ET ADDRESS  L'or registered office address here	A Florida Limited Liability Company)  Liability Company were filed on	Illowing:  of the limited liability company here:  N/A  with the words "Limited Liability Company," the designation  icable:  N/A  ET ADDRESS)  I/Or registered office address on our records, enter office address here:  N/A  Enter Florida street address, Florida

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

<u>Title</u>	Name	Address	Type of Action		
MGR	Jacek Swiatek	7963 Heirloom Dr Pensacola, FL 32514	✓ Add □ Remove		
MGR_	Amelia Karger-Swiatek	7963 Heirloom Dr Pensacola, FL 32514	Add Remove		
			Add Remove 		
			Add Remove		
			Add Remove		
		· · · · · · · · · · · · · · · · · · ·	Add Remove		
D. If amendin	g any other information, enter change(s	) here: (Attach additional sheets, if necessary.)			
Dated	May 12 , 2011	intek	-		
	1	authorized representative of a member			
Jacek Swiatek  Typed or printed name of signee					

yped or printed name of signer

Page 2 of 2

Filing Fee: \$25.00