

L11000081414

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

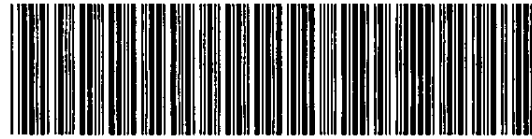
(Business Entity Name)

(Document Number)

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13 OCT 11 PM 1:29
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 9, 2013

ERIK ABRAMS
301 CLEMATIS ST SUITE 3000
WEST PALM BEACH, FL 33401

SUBJECT: NATIONAL RELIEF CENTER, LLC
Ref. Number: L11000081414

We have received your document for NATIONAL RELIEF CENTER, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 513A00023155

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: National Relief Center, 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:

Erik Abrams
Name of Person

Fremont Law Firm, PLLC
Firm/Company

301 Clematis St. Suite 3000
Address

West Palm Beach, Florida 33401
City/State and Zip Code

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

For further information concerning this matter, please call:

Erik Abrams at (954) 559-3745
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee
<i>already sent
check</i> | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

National Relief Center, 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 07-15-2011 and assigned Florida document number L11000081414.

This amendment is submitted to amend the following:

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

Fremont Law Firm, 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)

300 Clematis St. Suite 3000
West Palm Beach
Florida 33401

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

300 Clematis St. Suite 3000
West Palm Beach
Florida 33401

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 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

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

Legal Services

Dated October 11, 2013

Signature of a member or authorized representative of a member

Sean Batcheler

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
13 OCT 11 PM 1:09
RECEIVED
FALLS CHURCH, VA
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