# L11000081433

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 12, 2016

CORPORATE ACCESS, INC. 236 E 6TH AVE TALLAHASSEE, FL 32303

SUBJECT: 808 INVESTMENTS, LLC

Ref. Number: L14000182931

We have received your document for 808 INVESTMENTS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A dissolution for the above listed entity was previously received and filed with separate fees.

As discussed, we can apply the \$25 to another filing at your request. Please be sure to send a copy of this letter along with a new filing to ensure the funds are appropriately credited.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6051.

Michelle Milligan Senior Section Administrator

Letter Number: 416A00019289

Please use for this filing

www.sunbiz.org



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 6, 2016

CORPORATE ACCESS, INC.

SUBJECT: 808 INVESTMENTS, LLC

Ref. Number: L14000182931

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

Please return 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.

Dionne M Scott Regulatory Specialist II

Letter Number: 016A00018673

# CORPORATE ACCESS, \_

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

## **WALK IN**

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### **COVER LETTER**

	gistration Sec vision of Corp				
SUBJECT:		ASKET INSERTION CONS	ULTING GROUP		
SUBJECT.		Name of Lim	nited Liability Company	<del></del>	
		mendment and fee(s) are sub	-		
		SOUTH MILHAUSEN, P	.A.		
			Name of Person		
		C/O JEFFREY MILHAUS	SEN, EQS.		
C/O JEFFREY MILHAUSEN, EQS.  Firm/Company  1000 LEGION PLACE SUITE 1200  Address  ORLANDO, FLORIDA 32801  City/State and Zip Code  JEFFM@SOUTHMILHAUSEN.COM					
			Address	7.4	201
ORLANDO, FLORIDA 32801					
	City/State and Zip Code				
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For further	information co	te-mail address: ( ncerning this matter, please c	•	on) F	<b>&gt;</b>
JEFFREY	MILHAUSEN		407 539-1638	<b>四</b> 平	35
<u> </u>	Name of	Person	at () Area Code Daytime Tele	ephone Number	Encounter*
Enclosed is	a check for the	e 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 Certificate of Certified Cop (additional copy	Status &

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

FLANGE GASKET INSERTION (		C ADDRUCE ON AUE PROACTS		
(Name of the Dank	ed Liability Company as it now (A Florida Limited Liability Co	mpany)		
The Articles of Organization for this Limited L Florida document number L11000081633	iability Company were filed	d on JULY 15, 2011 and assigned		
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liability com	pany here:		
FLANGE GASKET INSERTION CONSULTING	GROUP, LLC			
The new name must be distinguishable and contain the v	ords "Limited Liability Compan	y," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applic	able:			
(Principal office address MUST BE A STREE	TADDRESS)	<u> </u>		
	·	S. S. T.		
Enter new mailing address, if applicable:		The way		
(Mailing address MAY BE A POST OFFICE	BOX)	<u> </u>		
	<del></del>	95		
		₩ . Q		
B. If amending the registered agent and registered agent and/or the new registered or		ress on our records, enter the name of the new		
registered agent and/or the new registered o	nice address here.			
Name of New Registered Agent:	SOUTH MILHAUSEN, P.A.			
New Registered Office Address:	1000 LEGION PLACE S	UITE 1200		
	E	nter Florida street address		
	ORLANDO	, Florida 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>	Address		Type of Action
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Page 3 of 3

Filing Fee: \$25.00