

L11 000097533

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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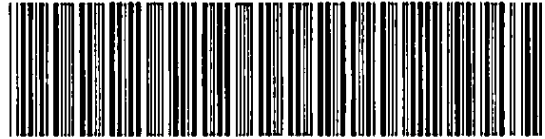
(Business Entity Name)

(Document Number)

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2021 NOV 22 AM 7:04

SECRETARY OF STATE  
TALLAHASSEE, FL

O SIMMONS

DEC 09 2021

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MARY LEE MILLER EA 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:

MARY LEE MILLER

Name of Person

MARY LEE MILLER EA LLC

Firm/Company

6278 N FEDERAL HIGHWAY SUITE 293

Address

FORT LAUDERDALE FL 33308

City/State and Zip Code

ERIC@MARYLEEMILLEREA.COM

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

For further information concerning this matter, please call:

MARY LEE MILLER

954 540-4026  
at ( )

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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2021 NOV 22 AM 7:04

MARY LEE MILLER EA LLC

SECRETARY OF STATE  
TALLAHASSEE, FL

(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 AUGUST 25, 2011 and assigned  
Florida document number L11000097533.

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 "L.L.C."

Enter new principal offices address, if applicable:

1440 CORAL RIDGE DRIVE #319

(Principal office address MUST BE A STREET ADDRESS)

CORAL SPRINGS FL 33071

Enter new mailing address, if applicable:

1440 CORAL RIDGE DRIVE #319

(Mailing address MAY BE A POST OFFICE BOX)

CORAL SPRINGS FL 33071

**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:

ERIC J. POLACEK

New Registered Office Address:

1440 CORAL RIDGE DRIVE #319

*Enter Florida street address*

CORAL SPRINGS FL

. Florida 33071

*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	ERIC J POLACEK	MANAGING MEMBER	<input checked="" type="checkbox"/> Add
		1440 CORAL SPRINGS DRIVE #319	<input type="checkbox"/> Remove
		CORAL SPRINGS FL 33071	<input type="checkbox"/> Change
AMBR	KELLY LEE WALKER	AUTHORIZED MEMBER	<input checked="" type="checkbox"/> Add
		30 OLIVER AVENUE	<input type="checkbox"/> Remove
		PENNSVILLE NJ 08070	<input type="checkbox"/> Change
AMBR	MARY LEE MILLER	AUTHORIZED MEMBER	<input type="checkbox"/> Add
		6278 N FEDERAL HWY #293	<input type="checkbox"/> Remove
		FORT LAUDERDALE FL 33308	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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