

L110000100590

Borie L. Hudson

(Requestor's Name)

P.O. Box 2751

(Address)

126 SW Chafman Glen  
Lake City, FL 32056

(Address)

Lake City, FL 32075 386 432-8282

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☒ MAIL

Gateway to Florida Security LLC

(Business Entity Name)

L110000100590

(Document Number)

Certified Copies ☒

Certificates of Status ☐

Special Instructions to Filing Officer

L. SELLERS

SEP 30 2011

EXAMINER

W11-47017

Office Use Only



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09/09/11--01003--005 \*\*25.00

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 12, 2011

BORIE L. HUDSON  
P.O. BOX 2751  
LAKE CITY, FL 32056

SUBJECT: GATEWAY SECURITY, L.L.C.  
Ref. Number: L11000100590

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

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6967.

Leslie Sellers  
Regulatory Specialist II

Letter Number: 911A00021101

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**Gateway Security, 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 09/01/2011 and assigned  
Florida document number L11000100590.

This amendment is submitted to amend the following:

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

**Gateway to Florida Security, LLC**

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)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_, Florida  
City Zip Code

Enter Florida street address

**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
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated \_\_\_\_\_,

Borie L. Hudson

Signature of a member or authorized representative of a member

Borie L. Hudson

Typed or printed name of signee