L11000135170

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B. BOSTICK

OCT - 7 2013

EXAMINER

COVER LETTER

TO:

Registration Section
Division of Corporations

LITCHFORD & CHRISTOPHER, 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:

Donald E. Christopher, Esquire

Name of Person

Baker, Donelson, Bearman, Caldwell & Berkowitz, PC

Firm/Company

200 South Orange Avenue, Suite 2900

Address

Orlando, FL 32801

City/State and Zip Code

dchristopher@bakerdonelson.com

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

For further information concerning this matter, please call:

Donald E. Christopher

___407\422**-**6600

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

LITCHFORD & CHRISTOPHER, LLC

(<u>Name of the Limited</u> (A	Liability Compan: Florida Limited Li	y as it now appea ability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company were filed on 11/30/2011 Florida document number L11000135170				
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	f the limited liabil	lity company hei	<u>re</u> :	
The new name must be distinguishable and end wit "L.L.C."	th the words "Limite	ed Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:		200 South C	range Avenue, Sı	uite 2900
(Principal office address MUST BE A STREET ADDRESS)		Orlando, FL	32801	<u>~</u>
-			YLLA	
			ت: سر در	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			03 	
			<u>-</u> نم	
				5 T
B. If amending the registered agent and/or registered agent and/or the new registered of			our records, enter t	he name of the new
Name of New Registered Agent:				
New Registered Office Address:	200 South C	Drange Avenu	e, Suite 2900	
New Registered Office Address.	Enter Florida street address			
	Orlando	, Florida 32801		801
·		City		Zip Code
New Registered Agent's Signature, if changing I	Registered Agent:			
I hereby accept the appointment as registered the provisions of all statutes relative to the paccept the obligations of my position as registering filed to merely reflect a change in the company has been notified in writing of this	oroper and compl istered agent as p registered office/	lete performance provided for in C	e of my duties, and I a Chapter 608, F.S. Or.	nm familiar with and if this document is

ed Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member Type of Action <u>Title</u> Address <u>Name</u> Add Remove Remove Remove AHASSEE, FE dieiD. Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Please change the addresses for MGRM's Christopher,

Donald E and Litchford, Hal K from 390 North Orange

Avenue, Suite 1875, Orlando, FL 32801 to 200 South

Orange Avenue, Suite 2900, Orlando, FL 32801

Dated September 26

~/~/~

fe of a member or authorized representative of a member

Donald E. Christopher

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 OCT -4 AM II: 05

BAKER DONELSON BEARMAN, CALDWELL & BERKOWITZ, PC

SHARON A. DENNY, LEGAL SECRETARY Direct Dial: 407 367.5408 E-Mail Address: sdenny@bakerdonelson.com

October 2, 2013

200 SOUTH ORANGE AVENUE SUITE 2900

POST OFFICE BOX 1549 ORLANDO, FLORIDA 32802

PHONE: 407.422.6600 FAX: 7407.841.0325

www.bakerdonelson.co

VIA FEDEX

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Sir/Madam:

Enclosed please find cover letters and forms changing the registered agent address and/or principal office address of the following entities:

- 1. CHRISTOPHER RENTALS, LLC Document No. L05000108274;
- 2. LITCHFORD & CHRISTOPHER, LLC Document No. L11000135170; and
- 3. POPLAR HEALTHCARE, PLLC Document No. M12000005266.

I have also enclosed our firm's check in the amount of \$75.00 payable to the Florida Department of State to cover the \$25.00 amendment cost for each of these three entities.

Should you have any questions regarding the enclosed, please do not hesitate to contact attorney Donald Christopher at 407-367-5402.

Very truly yours,

BAKER, DONELSON, BEARMAN, CALDWELL & BERKOWITZ, PC

Sharon A. Denny, Legal Secretary

/sd Enclosures