L11000135342

(Requ	estor's Name)	
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(City/S	State/Zip/Phon	e #)
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DEC 11 ZONA
J. HARRIS



ACCOUNT NO. : I2000000195

REFERENCE : 412110 8017262

AUTHORIZATION :

COST LIMIT

ORDER DATE: December 8, 2014

ORDER TIME : 3:21 PM

ORDER NO. : 412110-020

CUSTOMER NO: 8017262

DOMESTIC AMENDMENT FILING

NAME:

PROGRESSIVE EMPLOYER

MANAGEMENT COMPANY IV, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY

XX PLAIN STAMPED COPY

____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS:

COVER LETTER

TO:

Registration Section

Division of Corp	porations		
PROGRE	SSIVE EMPLOYER MA	ANAGEMENT COMPANY I	IV, LLC
SUBJECT:		nited Liability Company	,
		,	
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	TIM VELLA		
	7.1171 V 131523 1	None of Dance	
		Name of Person	
	PEMCO, INC.		
	Firm/Company		
	6407 PARKLAND DR.		
	Address		
	SARASOTA, FL 342	13	
	574CASOTA, FE 542		
	TVELLY	City/State and Zip Code SSIVEEMPLOYER.COM	
		to be used for future annual report noting	fication)
For further information on	ncerning this matter, please c	•	nonica _y
ror turner mornation co	neering this matter, prease c		
JANE ANDERSON		941 925-2990 1 Area Code Daytimo	E: 20136
Name of	Person	Area Code Daytimo	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)
Registra	NG ADDRESS: tion Section of Corporations	STREET/COURI Registration Section Division of Corpor	n
P.O. Box	k 6327	Clifton Building	
i aliahas	see, FL 32314	2661 Executive Ce	nter Circle

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



December 9, 2014

RESUBMIT

CSC COURTNEY WILLIAMS Please give original submission date as file date.

SUBJECT: PROGRESSIVE EMPLOYER MANAGEMENT COMPANY IV, LLC

Ref. Number: L11000135342

We have received your document for PROGRESSIVE EMPLOYER MANAGEMENT COMPANY IV, 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):

The effective date must be specific and cannot be prior to the date of filing.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 314A00025928

HOT BY EMBED TO WELL FILLING SUFFICIENCY OF SUFF

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PROGRESSIVE EMPLOYER MANAGEMENT COMPANY IV, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

() L	, torica bantou biacarij company)	
The Articles of Organization for this Limited Liab Florida document number <u>L11000135342</u>	ility Company were filed on 11/30/2011	and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and end with the wo	ds "Limited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	DIV.
		Sion Si
		∂ 26.
Enter new mailing address, if applicable:		on COY
(Mailing address MAY BE A POST OFFICE BO	<u></u>	3 3000
111 DE 11	<u></u>	8 25 5 25 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
		20 XS
B. If amending the registered agent and/or registered agent and/or the new registered offic		nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	·	
	Enter Florida street address	
_	, Florid	la
	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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
PRES	MICHAEL E. DRIS	6407 PARKLAND DR.	
		SARASOTA, FL 34243	Remove
CFO	MICHAEL DRIS	6407 PARKLAND DR	□ Add
		SARASOTA, FL 34243	Remove
CEO	CLINTON W BURGESS	6407 PARKLAND DR	
	SARASOTA, FL 34243	□ Remove	
CFO PETER GRABOWSKI	6407 PARKLAND DR	= Add	
	SARASOTA, FL 34243	□ Remove	
		SECRETA SECRETA Rem C -	
			SO PH CORPORAT
			20 Remove

D. If amending any other information, enter ch	nange(s) here: (Attach additional sheets, if necessary.)
. Effective date, if other than the date of filing	: (optional)
(The effective date must be specific, cannot be prior to date the date this document is filed by the Florida Department	e of receipt or filed date and cannot be more than 90 days after t of State)
Dated DECEMBER 5	2014
Zm	
Signature of a m	nember or authorized representative of a member
PETER GRABOWSKI - CFO	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00