#11/1000/44898

(Re	equestor's Name)	
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12/27/12-01026-016 **25.00

K.SALY EXAMINER JAN - 2 2013

COVER LETTER

TO:

Registration Section Division of Corporations

Scott Walker Software 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:

Scott Walker

Name of Person

Scott Walker Software LLC

Firm/Company

812 N Ocean Blvd #401

Address

Pompano Beach, FL 33062

City/State and Zip Code

scott@scottandglenna.com

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

For further information concerning this matter, please call:

Scott Walker

at (314) 6038289

Area Code & Daytime Telephone Number

Name of Person

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

FILED

12 DEC 27 PM 2: 08

(AI LAHASSEE FI COME

Scott Walker Software 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 12/28/201	and assigned
Florida document number L11000144898	 -	
This amendment is submitted to amend the following:	:	
A. If amending name, enter the new name of the li	imited liability company here:	
The new name must be distinguishable and end with the v "L.L.C."	words "Limited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	<u></u>	
(Principal office address MUST BE A STREET AD)	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flori	da street address
		, 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 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 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

<u>Title</u>	Name	Address	Type of Action
MGRM	Glenna P Walker	812 N Ocean Blvd #402	Add
		Pompano Beach, FL 33062	Remove
			_
			Add
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			_
			Add
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If amending any other information	, enter change(s) here: (Attach additional sheets, if necessary	.)
D / 00	0040	
ed December 26		
Sett	- Wale	
Signatu	re of a member or authorized representative of a member	
Scott Walker		
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00