

L12000013867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

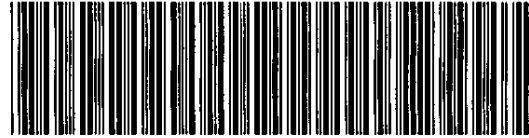
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOV 25 2013

T. CAMPBELL

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LEAN Compliance Partners 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:

Myriam OCHART  
Name of Person

Lean Compliance Partners  
Firm/Company

15250 NW 6 Court  
Address

Pembroke Pines, FL 33067  
City/State and Zip Code

myriam@lean compliance partners.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Myriam OCHART at (954) 4252656  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
13 NOV 22 PM 4:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

November 7, 2013

MYRIAM OCHART  
LEAN COMPLIANCE PARTNERS LLC  
15250 NW 6TH CT  
PEMBROKE PINES, FL 33431

SUBJECT: LEAN COMPLIANCE PARTNERS, LLC  
Ref. Number: L12000013867

We have received your document for LEAN COMPLIANCE PARTNERS, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LIMITED PARTNERSHIP, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of 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.

Tammy Hampton  
Regulatory Specialist III  
Registration/Qualification Section

Letter Number: 313A00025967

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

Lean Compliance Partners 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 01/30/2012 and assigned  
Florida document number L12000013867

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 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)**

15250 NW 6 Court  
Pembroke Pines, FL 33067

**Enter new mailing address, if applicable:**

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

15250 NW 6 Court  
Pembroke Pines, FL 33067

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**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:

*Enter Florida 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 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>
Director	Raymond Rodriguez	15250 NW 6 Court	<input checked="" type="checkbox"/> Add
	Raymond Rodriguez	Pembroke Pines, FL	<input type="checkbox"/> Remove
		33028	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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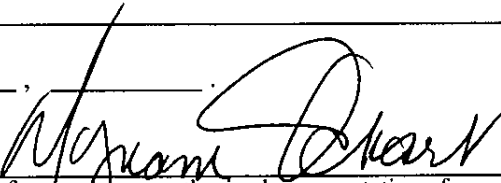
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Dated

Nov. 20, 2013



Signature of a member or authorized representative of a member

Myriam OCHART

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA