Florida Department of State

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FAX COVER SHEET

ТО		
COMPANY		
FAX NUMBER	18506176383	
FROM	Tony Burroughs	
DATE	2012-03-12 09:36:49 PDT	
RE	FL SOS - LZ order # 502817930	

COVER MESSAGE

Tony Burroughs

Business Special Filings - Legal Document Preparation Specialist

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ADVOPILOT, 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:

Barbara Dang

(Name of Person)

Legalzoom.com, Inc.

(Firm/Company)

100 W. Broadway Suite 100

(Address)

Glendale, CA 91210

(City/State and Zip Code)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

\$30.00 Filing Fee &

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For further information concerning this matter, please call:

(Name of Person)

Enclosed is a check for the following amount:

Barbara Dang

\$25.00 Filing Fee

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle

(Area Code & Daytime Telephone Number)

__\$60.00 Filing Fee,

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Taliahassee, FL 32301

at (323) 962-8600

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ADVOPILOT, LLC			
(Name of the Limited Liabi (A Florid	lity Company as it now appears on our lida Limited Liability Company)	(ecords.)	
The Articles of Organization for this Limited Liability	y Company were filed on <u>02/08/2012</u>	2 and assigned	
Florida document number <u>L12000018795</u>			
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the l	limited liability company here:		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the d	esignation "LLC" or the abbreviation	
B. If amending the registered agent and/or representered agent and/or the new registered office a Name of New Registered Agent: New Registered Office Address:		us, enter the name of the new	
New Registered Office Address.	(Enter Florida street address)		
		, Florida	
_	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Register	ered Agent:		
I hereby accept the appointment as registered age the provisions of all statutes relative to the proper accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this change	and complete performance of my du dagent as provided for in Chapter 60 ered office address, I hereby confirm	ties, and I am familiar with and 18, F.S. Or, if this document is	
	(If Changing Perintered Agent Signat	nire of New Resistered Agent)	

MGR = Manager

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:

	Managing Member	Address	Type of Action
Title	Name	Address	Type of Action
MGRM	FLEMING, DONNA E	729 DENISE DR	Add
		CRESTVIEW FL 32536 US	✓ Remove
			☐ Add
······································			Remove
			
···			Add Remove
			
			Add Remove
			Add
			Remove
			□Add
			Remove
D. If amend	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessar	ry.)
			· · · · · · · · · · · · · · · · · · ·
			···
Dated0	3/10/12 ,	•	
	(Motor 570		
		er or authorized representative of a member	
	FLEMING, CLIFTON D	d or printed name of signee	

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Filing Fee: \$25.00