

L12000026456

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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FILED
13 JUL -3 PM 4:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

JUL - 5 2013



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 25, 2013

FINANCIAL LITERACY SERVICES, LLC
TOM BREAZEALE
39 MAPLE AVE.
SHALIMAR, FL 32579

SUBJECT: FINANCIAL LITERACY SERVICES, LLC
Ref. Number: L12000026456

We have received your document for FINANCIAL LITERACY SERVICES, 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):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 313A00015867

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Financial Literacy Services, 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:

Tom Breazeale

Name of Person

Financial Literacy Services, LLC

Firm/Company

39 Maple Ave.

Address

Shalimar, FL 32579

City/State and Zip Code

bigtom1@cox.net

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

For further information concerning this matter, please call:

Tom Breazeale

Name of Person

850 651-4555

at ()

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**

Financial Literacy Services, LLC

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

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 2/23/2012 and assigned
Florida document number L12000026456.

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)

210 N. University Dr.

Ste. 800

Coral Springs, FL 33071

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

210 N. University Dr.

Ste. 800

Coral Springs, FL 33071

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:

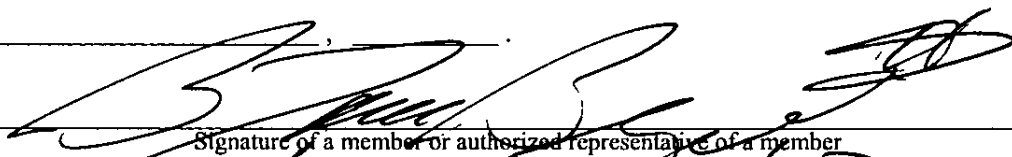
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	B.T.Breazeale, II	39 Maple Ave.	<input type="checkbox"/> Add
		Shalimar, FL 32579	<input checked="" type="checkbox"/> Remove
MGRM	Christopher M Young	233 NW 119th Dr.	<input type="checkbox"/> Add
		Coral Springs, FL 33071	<input checked="" type="checkbox"/> Remove
MGRM	Monetary Management Systems, Inc.	39 Maple Ave.	<input checked="" type="checkbox"/> Add
		Shalimar, FL 32579	<input type="checkbox"/> Remove
MGRM	Clutch Marketing, Inc.	233 NW 119th Dr.	<input checked="" type="checkbox"/> Add
		Coral Springs, FL 33071	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated _____


Signature of a member or authorized representative of a member
B Thomas Broyles II
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00