

L12000059545

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

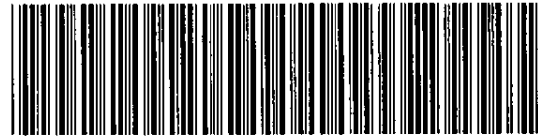
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800245092698

02/27/13--01004--019 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2013 FEB 27 AM 10:46

C. LEWIS
FEB 28 2013
EXAMINER

CHAPMAN LAW GROUP, PLC

ATTORNEYS

12008 South Shore Boulevard
Suite 107
Wellington, Florida 33414
(561) 753-5996 Telephone
(561) 753-9966 Facsimile

February 22, 2013

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

**Re: Articles of Amendment to Articles of Organization
for Destrier Consuting Service LLC**

To Whom It May Concern:

Enclosed please find our Articles of Amendment for Destrier Consulting Service LLC. During the initial filing the company name was inadvertently misspelled (the "l" in "Consulting" was omitted). We also are changing the company's resident agent.

Should you have any questions, please don't hesitate to call me or my assistant, Lisa, at the above phone number.

Respectfully,

CHAPMAN LAW GROUP, PLC


AVERY S. CHAPMAN

Enclosure

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Destrier Consulting Service 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:

Avery S. Chapman, Esq.
Name of Person

Chapman Law Group, PLC
Firm/Company

12008 South Shore Blvd., Suite 107
Address

Wellington, FL 33414
City/State and Zip Code

ascsg1@cs.com
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Boettner at (561) 753-5996
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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
SECRETARY OF STATE
DIVISION OF CORPORATION

2013 FEB 27 AM 10:46

Destrier Consulting Service 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 5/02/2012 and assigned
Florida document number L12000059545

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Destrier Consulting Service LLC

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Avery S. Chapman, Esq.

New Registered Office Address:

12008 South Shore Blvd., Suite 107

Enter Florida street address

Wellington

City

Florida

33414

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:

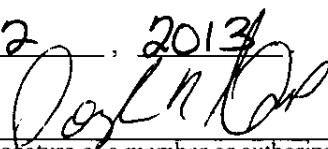
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
2013 FEB 27 AM 10:46

Dated February 22, 2013


Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00