L1200082647

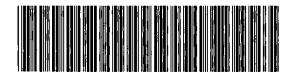
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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EXAMINER



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COVER LETTER

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	tion Section of Corporations		
SUBJECT:	A.I.13 Private Inve	estigations A1200155 LLC	
		nited Liability Company	
The enclosed Artic	cles of Amendment and fee(s) are su	ubmitted for filing.	·
Please return all co	prrespondence concerning this matter	er to the following:	c.
	. 	Charles W Cooper Name of Person	AS STATE
		Name of Felson	2
٠.	A.I.13 Private Investigations LLC A1200155		
	•	Firm/Company	E 90
,	80	30 First Coast Hwy C-10	# 8 43
		Address	
	_		
	Ferna	andina Beach Florida,32034 City/State and Zip Code	
•		Info@ai13pi.com	,
	E-mail address:	(to be used for future annual report notification)	
For further inform	ation concerning this matter, please	call:	
•	01 1 14 0		1242
	Charles W.Cooper Name of Person	at (904) 321-	1313
Enclosed is a chec	k for the following amount:		:
\$25.00 Filing F	Fee \$\int_\$30.00 Filing Fee & Certificate of Status	S55.00 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 AI Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	·

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A.I.13 Private Investigations LLC A1200155 LLC

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

(A Florida Limited Liability Company)

The Articles of Organization f	or this Limited Liability Co	ompany were filed on	June 22,2012	and:assigned
Florida document number	L12000082647	<u>-</u> :		# Str
This amendment is submitted	to amend the following:	•		2
A. If amending name, enter	the new name of the limit	ted liability company he	ere:	G Z
				F3 9
The new name must be distinguing. "L.L.C."	shable and end with the word	ds "Limited Liability Comp	pany," the designation "L	LC" or the abbreviation
Enter new principal offices a	ddress, if applicable:			
(Principal office address MU	ST BE A STREET ADDRI	ESS)		
				
Enter new mailing address,	f applicable:			
(Mailing address MAY BE A	• •			
	· · · · · · · · · · · · · · · · · · ·			
B. If amending the registoner in the registered agent and/or the registered agent agen			our records, enter t	he name of the new
Name of New Regist	ered Agent:		·	
New Registered Offi	ce Address:			
•		Enter Florida street address		ress
			, 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, 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>	Name	Address	Type of Action
Owner	Charles W.Cooper	8030 First Coast Hwy. C-10 Fernandina Beach Florida 32034	✓ Add Remove
.			Add Remove
			Add Remove
			Add Remove
	<u> </u>		Add Remove
			Add Remove
D. If amend	ling any other information, ente	er change(s) here: (Attach additional sheets, if necessary.)	
Dated	September 21	2012	
	Signature of a	Charles W.Cooper Typed or printed name of signee	· ·

Page 2 of 2

Filing Fee: \$25.00