

#L 12000137791

(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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13 AUG - 1 PM 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
AUG - 2 2013



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 5, 2013

CLIN CONNECTION LLC
AMBER BRANCA
5000 VICTORIA PARK DR. #5109
DAVENPORT, FL 33896

SUBJECT: CLIN CONNECTION LLC
Ref. Number: L12000137791

We have received your document for CLIN CONNECTION 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):

The registered agent must sign accepting the designation.

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

Karen A Saly
Regulatory Specialist II

Letter Number: 513A00016581

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Clin Connection 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:

Amber Branca
Name of Person

Clin Connection LLC
Firm/Company

5000 Victory Park dr # 5109
Address

Davenport FL 33896
City/State and Zip Code

Nikkiabranca@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amber Branca at (407) 569-5495
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
13 AUG -1 PM 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Clin Connection 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 10/30/12 and assigned
Florida document number 412000137791.

This amendment is submitted to amend the following:

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

Solara Clinical Research LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5000 Victoria Park dr
5109 Davenport, FL
33896

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO Box 701875 Same as above
St. Cloud, FL 34770

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:

Amber Branca

New Registered Office Address:

5000 Victoria Park dr #5109

Enter Florida street address

Davenport

City

Florida

33896

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.

Amber Branca

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>
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MGR	Tracy Rivera	3956 Town Center Blvd. Orlando Fl 32837 # 417	Add <u>Remove</u>
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MGR	William Hunt	5000 Victoria Park DR APT # 5109 Davenport, Fl 33896	<u>Add</u> Remove
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			Add Remove
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			Add Remove
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			Add Remove
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			Add Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated June 28, 2013.

Amber Branca

Signature of a member or authorized representative of a member

Amber Branca

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00