

L12000/62/34

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TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
MAR -7



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 1, 2016

THE LEWIS LAW FIRM, PL
DOUGLAS A LEWIS
745 12TH AVE. SOUTH, STE. 103
NAPLES, FL 34102

SUBJECT: THE LEWIS LAW FIRM, PL
Ref. Number: L12000162134

We have received your document for THE LEWIS LAW FIRM, PL 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 name of a professional limited liability company must contain CHARTERED, PROFESSIONAL LIMITED LIABILITY COMPANY, P.L.L.C. or PLLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 416A00004253

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: The Lewis Law Firm, PL
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:

Douglas A. Lewis

Name of Person

Thompson Lewis Law Firm, PLLC

Firm/Company

745 12th Avenue South, Suite 103

Address

Naples, Florida 34102

City/State and Zip Code

doug@tllfirm.com

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

For further information concerning this matter, please call:

Douglas A. Lewis

239 272-2372
at ()

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
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CLERK OF STATE
TALLAHASSEE, FLORIDA

The Lewis Law Firm, PL

(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 12/31/2012 and assigned
Florida document number L12000162134.

This amendment is submitted to amend the following:

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

Thompson Lewis Law Firm, PLLC

The new name must be distinguishable and contain 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)

745 12th Avenue South

Suite 103

Naples, Florida 34102

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

745 12th Avenue South

Suite 103

Naples, Florida 34102

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:

Douglas A. Lewis, Esq.

New Registered Office Address:

745 12th Avenue South, Suite 103

Enter Florida street address

Naples

, Florida 34102

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Douglas A. Lewis, Esq.	9128 Strada Place	<input type="checkbox"/> Add
		#10115	<input checked="" type="checkbox"/> Remove
		Naples, Florida 34108	<input type="checkbox"/> Change
MGR	Douglas A. Lewis, Esq.	745 12th Avenue South	<input checked="" type="checkbox"/> Add
		Suite 103	<input type="checkbox"/> Remove
		Naples, Florida 34102	<input type="checkbox"/> Change
MGR	Stephen E. Thompson, Esq.	745 12th Avenue South	<input checked="" type="checkbox"/> Add
		Suite 103	<input type="checkbox"/> Remove
		Naples, Florida 34102	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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