## #1/3000/0152

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K.SALY EXAMINER MAR 7 - 2013

## **COVER LETTER**

TO:

Registration Section Division of Corporations

Attorney Marketing Solutions, 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:

Mark Martella

Name of Person

Martella Law Firm, P.L.

Firm/Company

18501 Murdock Cir., Suite 304

Address

Port Charlotte, FL 33948

City/State and Zip Code

mark@martellalaw.com

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

For further information concerning this matter, please call:

Mark Martella

941,206-3700

Name of Person

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

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Attorney Marketing Solutions, 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 Liab	oility Company were filed on January 2	2, 2013 and assigned
Florida document number L13000010152	<del>.</del>	
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of the	he limited liability company here:	
Maverick Attorney Marketing, LLC		
The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET	ADDRESS)	
		and the state of t
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	0	ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Futon Flori	da street address
	Ener Pari	aa sireet aaaress
	City	, Florida Zip Code
	Cuy	гір Соае

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

WIGRINI = Managing Member					
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action		
			Add		
			Remove		
			Add		
			Remove		
			Add		
		<del></del>	Remove		
			Add		
			Remove		
			Remove		
			Add		
			Remove		

D. If am	ending any other information, o	enter change(s) here: (Attach additional sheets, if necessary.)
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•		
Dated	Feb 26	<u>, 7013</u> .
		197
		of a member or authorized representative of a member
	Mark Martella	
		Cryped or printed name of signce

Page 3 of 3

Filing Fee: \$25.00