

L13000016212

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

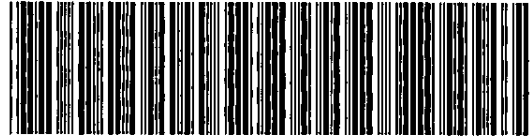
(Business Entity Name)

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TALLAHASSEE FLORIDA

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D. BRUCE

James A DeMiles PLLC

Office 1.754.263.7887

Fax. 1.954.744.5826

E-mail. james@demileslaw.com

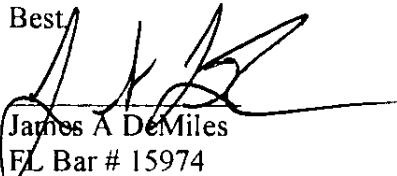
2450 Hollywood Blvd, Suite 103 Hollywood FL 33020

ATTN: Division of Corporations
FROM: James A DeMiles, Esq.
RE: Amendment to Articles of Incorporation of James A DeMiles PLLC
DATE: October 24, 2014

Dear Division of Corporations,

Included with this letterhead please find a copy of the executed form for the Amendment to the Articles of Incorporation of James A DeMiles PLLC, a Florida Limited Liability Company.

Best,



James A DeMiles
FL Bar # 15974

James A DeMiles PLLC
2450 Hollywood Blvd, Suite 103
Hollywood, FL 33020
Office: (754)263-7887
Cell: (305)397-4012
Fax: (954)744-5826
james@demileslaw.com

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: James A. DeMiles PLLC
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:

James A. DeMiles
Name of Person

James A. DeMiles PLLC
Firm/Company

2450 Hollywood Blvd, Suite 103
Address

Hollywood, Florida 33020
City/State and Zip Code

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

For further information concerning this matter, please call:

James A. DeMiles at (305) 397-4012
Name of Person Area Code Daytime Telephone Number

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STATE CLERK OF STATE
TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" 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

TO
ARTICLES OF ORGANIZATION
OF

James A DeMiles PLLC

(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 January 31, 2013 and assigned
Florida document number L13000016212

This amendment is submitted to amend the following:

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

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)

2450 Hollywood Blvd, Suite 103
Hollywood, FL 33020

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2450 Hollywood Blvd, Suite 103
Hollywood, FL 33020

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:

New Registered Office Address:

2450 Hollywood Blvd, Suite 103
Enter Florida street address
Hollywood, Florida 33020
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

Authorized Member 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	James A DeMiles	1481 NW N. Brier Dr.	<input type="checkbox"/> Add
		Miami FL 33125	<input checked="" type="checkbox"/> Remove
MGR	James A. DeMiles	2450 Hollywood Blvd	<input checked="" type="checkbox"/> Add
		Suite 103	<input type="checkbox"/> Remove
		Hollywood FL 33020	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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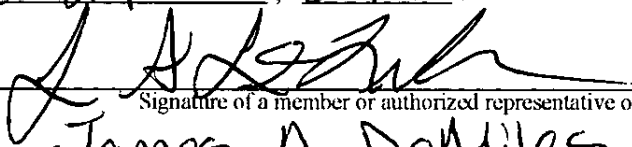
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TALLAHASSEE FLORIDA

I am familiar with and accept the obligations of the position.

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated October 24, 2014



Signature of a member or authorized representative of a member

James A. DeMiles

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TALLAHASSEE FLORIDA