

L13000022983

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

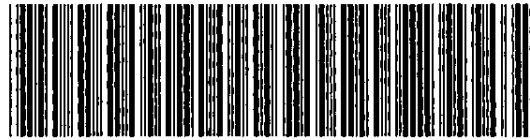
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2013 MAR -5 AM 8:46

C. LEWIS
MAR - 6 2013
EXAMINER

ATTORNEYS CORPORATION SERVICE, INC.
5668 EAST 61ST STREET
COMMERCE, CA 90040
TEL: (800) 462-5487 ext. 133 FAX: (800) 388-0330
EMAIL: dmartinez@attorneyscorpservice.com

DOCUMENT FILING REQUEST LETTER

REGULAR FILING SERVICE

DATE: 3/4/13

EXPEDITE please!

FROM: DESIREE MARTINEZ

Client Matter: #9039624

TO: DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2661 Executive Center Circle
Tallahassee, FL 32301

ATTN: DOCUMENT FILING DIVISION

RE: **LA Software LLC**

Enclosed is one of the following: **(X) Articles of Amendment**

Return request with filing: **(1) Endorsed Copy (w/filing)**

Return request via following: **(X) REGULAR MAIL**

Total Page(s) attached including transmittal page:

****Fax/Email a copy of the filed documents upon acceptance of filing****

****PLEASE RETURN FILED DOCUMENTS ATTACHED WITH AN INVOICE TO:
ATTORNEYS CORPORATION SERVICE, INC.
5668 EAST 61ST STREET, COMMERCE, CA 90040****

****PLEASE CONFIRM UPON RECEIVED DOCUMENTS****

NOTE(S):

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LA Software 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:

Desiree Martinez
Name of Person

ROCKET LAWYER
Firm/Company

5668 E 61st ST
Address

Commerce, CA 90040
City/State and Zip Code

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

For further information concerning this matter, please call:

Desiree Martinez at (800) 462-5487 ext 133
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**

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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LA Webware 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 2/13/13 and assigned
Florida document number L13000022983.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Enter Florida street address

_____, 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 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:

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DIVISION OF CORPORATION

MGR = Manager
MGRM = Managing Member

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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Lawrence Ashkenas	5240 Ventura Dr. Delray Beach, FL 33484	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Lawrence Ashk	5240 Ventura Dr. Delray Beach, FL 33484	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated

March 4th

2013

Signature of a member or authorized representative of a member

DESIREE MARTINEZ

Typed or printed name of signee