13000059631

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2013 SEP -9 AM 8- 02

J. SAULSBERRY EXAMINER

SEP 12 2013

COVER LETTER

SUBJECT:	Name of Limited Liability Company
The enclosed Articles of /	Amendment and fee(s) are submitted for filing.
Please return all correspoi	dence concerning this matter to the following:
	SEAN WOHL
	Name of Person
	PREVENTATIVE MEASURES INVESTIGATIONS, LLC
	PREVENTATIVE MEASURES INVESTIGATIONS, LLC Firm/Company
	1420 Riverside Dr.
	Address
	Holly Hill, FL 32117
	City/State and Zip Code seamwhol1@gmail.com Seanwoh 1 @gmail.com II-mail address: (to be used for future annual report notification)
	neerning this matter, please call:
Sean Wohl	386 5 66-3683

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 Cliffon Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

PREVENTATIVE MEASURES INVESTIGATIONS & SECURITY, 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 Apr	11 23, 2013 and assigned
Florida document number L13000059631	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here	:
PREVENTATIVE MEASURES INVESTIGATIONS, LLC	
The new name must be distinguishable and end with the words "Limited Liability Compan" L.L.C."	y," the designation "LLC" or the abbreviatio
Enter new principal offices address, if applicable:	2013 5
(Principal office address MUST BE A STREET ADDRESS)	
	-
Enter new mailing address, if applicable:	3 5
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	02
B. If amending the registered agent and/or registered office address on or registered agent and/or the new registered office address here: Name of New Registered Agent:	or records, <u>enter the name of the nev</u>
New Registered Office Address: Ente	r 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:

<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
gangaagaagaagaagaagaagaagaagaagaagaagaagaagaagaagaagaaga	April 4 (2) - 1/2		
			Remove
			Remove
			
			ZBI3 SEP Add Add Add
			Rimiwe & O
			Add
			Remove

D. If am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated	Sept. 4 1. 2013
	Signature of a member or authorized representative of a member
	Sean Wohl
	Typed or britted name of signee
	Page 3 of 3

Filing Fee: \$25.00

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