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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NANCE GROUP, P.L.

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:

DAVID W. NANCE

Name of Person

NANCE GROUP, P.L.

Firm/Company

3912 CONSTANCE STREET

Address

NEW ORLEANS, LA 70115

City/State and Zip Code

dwn@nancegroup.com

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

For further information concerning this matter, please call:

DAVID W. NANCE

_{.,,}504,**450-3938**

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

NANCE GROUP, P.L.		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L13000065658</u> .	were filed on 5/6/2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limi"L.L.C."		LC or the abbreviation
Enter new principal offices address, if applicable:	236 EAST 6TH AVENUE	
(Principal office address MUST BE A STREET ADDRESS)	TALLAHASSEE, FL 32303	SS 5
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		he name of the new
New Registered Office Address:	E 4- El - 1 11	
	Enter Florida street addr	Ell
	, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

.vi Chicivi	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
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 i	5/9/13
	Signature da member or authorized representative of a member
	DAVID W. NANCE, MGR

Page 3 of 3

Filing Fee: \$25.00

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