: 13000081798

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SECRETARY OF STATE AND A SECRETARY OF STATE

JUL - 2 2013 J. BRYAN

COVER LETTER

Division of Corpo	rations		
SUBJECT: Erickson E	SI, LLC		
		ed Liability Company	
The enclosed Articles of An	nendment and fee(s) are sub	mitted for filing.	ABIS JUL -1 PH 3: 48 SECRETARY OF FLORID.
Please return all correspond	ence concerning this matter t	to the following:	P. S. C.
	Thane Paul Erickson		
		Name of Person	· · · · · · · · · · · · · · · · · · ·
	Erickson ESI, LLC		
		Firm/Company	
	3440 Hollywood Blvd	-	
		Address	
	Hollywood, FL 33021		
		City/State and Zip Code	
1	terickson@ericksones		
	E-mail address: (to	be used for future annual report notification	on)
For further information conc	cerning this matter, please ca	dl:	
Thane Erickson		_{at (} 786 ₎ 505-4374	
Name of Pe	erson	Area Code & Daytime Te	lephone Number
Enclosed is a check for the f	ollowing amount:		
■ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Cartificate of Status & Certified Copy (additional copy is enclosed)

TO:

Registration Section

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

Erickson ESI, LLC		do Es T
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on da Limited Liability Company)	our records.
The Articles of Organization for this Limited Liabilit	ty Company were filed on June 6,	2013 and assigned
Florida document number L13000081798		2013 and assigned
This amendment is submitted to amend the following	5 :	
A. If amending name, enter the new name of the	limited liability company here:	
Erickson ESI, PLLC		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AL	ODRESS)	
	 	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
	··· · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or re registered agent and/or the new registered office a	_	ecords, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter F	lorida street address
	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:

MGR = Man MGRM = Ma	ager anaging Member		
<u>Title</u>	Name	Address	Type of Action
			Addi) Remove
			Add
			Remove
			Add
			Add
			Remove
			Add
	·····		Add
			Remove

Erickson ESI elects to be organized under a Florida Professional Limited Liability Company with the purpose of: Practice of law and legal services Dated June 27 2013	D. If amending	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Practice of law and legal services Dated June 27 2013	Ericks	son ESI elects to be organized under a Florida Professional Limited
Dated June 27 2013	Liabil	ity Company with the purpose of:
Together to	Pract	ice of law and legal services
Together to		THE WAY
Together to		
	Dated June 27	2013
Cianistana af a manula a a a salta aire d'un managantativa af a manula a a a a a a a a a a a a a a a a a a		
Signature of a member of authorized representative of a member		Signature of a member or authorized representative of a member
Thane Paul Erickson	<u>Tł</u>	
Typed or printed name of signee		Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00