

L130000095592

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

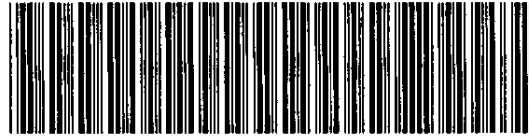
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Amey

Office Use Only



000249470120

000249470120
07/11/13--01032--006 **25.00

FILED
2013 JUL 11 AM 8:30
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER
JUL 12 2013

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PAUL MILLS ATM SVCS 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:

PAUL MILLS

Name of Person

PAUL MILLS ATM SVCS LLC

Firm/Company

3818 BRAEMERE DRIVE

Address

SPRING HILL, FL 3609

City/State and Zip Code

PDM1945@GMAIL.COM

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

For further information concerning this matter, please call:

PAUL MILLS

Name of Person

702 378-8144

at ()

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

2013 JUL 11 AM 8:30
FILING

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

PAUL MILLS ATM SERVICES 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 07/03/2013 and assigned
Florida document number L13000095592.

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:

PAULINE MILLS

New Registered Office Address:

3818 BRAEMERE DRIVE

Enter Florida street address

SPRING HILL

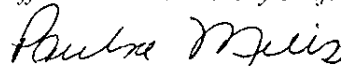
City

Florida 34609

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.



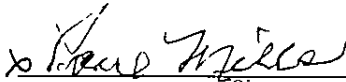
If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
MGRM = Managing Member

Page 2 of 3

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

Dated JUL 9, 2013



Signature of a member or authorized representative of a member

PAUL MILLS

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 JUL 11 AM 8:30
FBI - NEW YORK
RECEIVED