

L13000099869

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP - 3 2013

T. HAYDON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Priority Specialized Services 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:

Jose A Paez

Name of Person

Jose A Paez

Firm/Company

P.O. Box 1601

Address

Ocala, FL 34474

City/State and Zip Code

priorityspecialize@gmail.com

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

For further information concerning this matter, please call:

Jose A Paez

Name of Person

at (**352**) **2195269**

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

13 AUG 30 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 2, 2013

JOSE A PAEZ
P O BOX 1601
OCALA, FL 34474

SUBJECT: PRORITY SPECIALIZE SERVICES LLC
Ref. Number: L13000099869

We have received your document for PRORITY SPECIALIZE SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You are missing pages 2 & 3.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 013A00018644

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

Priority Specialize 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 07/15/2013

Florida document number L13000099869

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Priority Specialized Services LLC

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:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
	N/A.		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
	N/A		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
	N/A		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
	N/A.		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
	N/A		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
	N/A		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

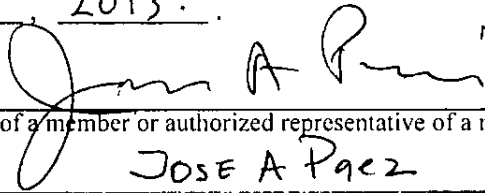
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TALLAHASSEE, FLORIDA

13 AUG 30 PM 3:30
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E-Mail Update:
priorityspecialize@gmail.com

Dated 8/19, 2013.



Signature of a member or authorized representative of a member

JOSE A Paez

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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