L13000103132

(Requestor's Name) (Address) (Address)	400354995794
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	11/16/2001002023 ** 25.00
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COVER LETTER

Tallahassee, FL 32314

	egistration Se ivision of Cor			
SUBJECT	BROWN A	ACCOUNTING AND TAX SE	RVICES LLC	
SUBJECT	·	Name of Lim	ited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retui	rn all correspo	ondence concerning this matter	to the following:	
		Veronica G Brown		
			Name of Person	
		Brown Accounting and Ta	x Services LLC	
		•	Firm/Company	
		9905 Old St Augustine Ro	ad Suite 102	
			Address	
		Jacksonville, FL 32257		
			City/State and Zip Code	
		grevero@aol.com		
		E-mail address: (to be used for future annual report no	tification)
For further	information c	oncerning this matter, please co	all:	
Veronica C	i Brown		954 812-4600	
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is	a check for th	he 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)
	ailing Addres		Street Address:	ection
		Corporations	Registration S Division of Co	
	O. Box 632	•	The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BROWN ACCOUNTING AND T (Name of the Limi		vappears on our records)		
\ <u></u>	ted Liability Company as it nov (A Florida Limited Liability Co.	npany)		
The Articles of Organization for this Limited L	iability Company were filed	I on <u>07/22/2013</u>	a	nd assigned
Florida document number L13000103132	,			
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name o	f the limited liability comp	oany here:		
N/A				
The new name must be distinguishable and contain the	vords "Limited Liability Compan	y," the designation "LLC" or	the abbreviat	ion "L.L.C."
Enter new principal offices address, if appli	able:		-	
Principal office address MUST BE A STREE	TADDRESS)		<u> </u>	202
) N
				B L
Enter new mailing address, if applicable:			4. <u>(</u>)	5
Mailing address MAY BE A POST OFFICE	BOX)		Ş	TO : 11
THE PARTY OF THE P			1.27	25 -
		-		06
B. If amending the registered agent and/or agent and/or the new registered office addre		o our records, <u>enter the</u>	name of th	he new regi
Name of New Registered Agent:	N/A			
New Registered Office Address:				
	E	nter Florida street address		
		, Florid	a	
	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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Andre F Brown	9905 Old St Augustine Rd Suite 102	□Add
		Jacksonville, FL 32257	W Remove
			□Change
			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
		 	□Change
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			□Change
			□Add
			□Remove

N/A 				
		·		

			<u></u>	
	 			
		 		
				
				
				
			, 40	
ective date, if other than th	e date of filing:		(optional)	
effective date is listed, the date m te: If the date inserted in this l	ust be specific and cannot be pri-	or to date of filing or more th	tan 90 days after filing.) Pursua	at to 605.0207
ument's effective date on the			juirements, this date will not	i be listed as
cord specifies a delayed effect	ive date, but not an effective	time, at 12:01 a.m. on th	e earlier of: (b) The 90th of	iay after the
s filed.				
November 14	2020			
ea	·	·		
1/1 rane	in J Bro	un		
us -	7 10	- <i>-</i>		
	Signature of a member or aut	inorized representative of a	member	
Veronica G Brown	Signature of a member or au	thorized representative of a	member	

Filing Fee: \$25.00