L13000139942

(Req	uestor's Name)	
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JUL 1 6 2014 S. YOUNG

COVER LETTER

Division of Corporations	
SUBJECT: Strategic Financial and Insurance 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:	
Steven Hoskinson Name of Person Strategie Financial Services / LC	
Strategic Financial Services LLC Firm/Company 14501 Walsinghow Rd.	
14501 Walsinghow Rd.	
\cdot , ϵ	
Largo FL 33774 City/State and Zip Code	;
City/State and Zip Code	
City/State and Zip Code Steve @ Strategic financial Services. net E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Steven Huskinson at (727) 595 - 6354 Name of Person Area Code Daytime Telephone Number	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee Certificate of Status □ \$55.00 Filing Fee Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)	
MAILING ADDRESS: STREET/COURIER ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327

TO:

Registration Section

Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



July 2, 2014

STEVEN HOSKINSON 14501 WALSINGHAM ROAD LARGO, FL 33774

SUBJECT: STRATEGIC FINANCIAL AND INSURANCE SERVICES LLC

Ref. Number: L13000139942

We have received your document for STRATEGIC FINANCIAL AND INSURANCE SERVICES LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return 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.

Shelia H Young Regulatory Specialist II

Letter Number: 714A00014322

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

Strategic Financial an	1 Insurance 5	pervices LLC
Strategic Financial an (Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our reco liability Company)	ords.
The Articles of Organization for this Limited Liability Company	were filed on October	4,2013 and assigned
Florida document number <u>L 13 0001399 42</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
Strategic Financial Servi The new name must be distinguishable and end with the words "Limited Liab	izer LLC	
The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "	LLC" or the abbreviation,"L.L.C."
Enter new principal offices address, if applicable:	Same	
(Principal office address MUST BE A STREET ADDRESS)		200
Enter new mailing address, if applicable:	<u>Same</u>	
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our recor	ds, enter the name of the new
	•	
Name of New Registered Agent: Same		
New Registered Office Address:		
	Enter Florida street addr	ress
	.1	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 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
MGR	David Butt	14503 Walsinghum Road	_B Add	
		14503 Walsinghum Road Largo, FL 33774	□ Remove	
			Add	
			□ Remove	
			□ Add	
			_ Remove	
			Add Remove	
			_	
			_□ Remove	
			- _□ Add	
		**	☐ Remove	

D. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	NA
	
	
(The effective	ate, if other than the date of filing: Date of Filing (optional) date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after document is filed by the Florida Department of State)
Dated	JUNE 26 2014.
	Stum ODen
-	Signature of a member or authorized representative of a member
_	STEVEN MICHAEL HOSKINSON Typed or printed name of signee
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00