L13000142478

(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
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•	-		COVER LETTER ,	
	gistration Se vision of Cor		P	>
SUBJECT:		ASSET MANAGEMENT FIR	RM, LLC	
SUBJECT:		Name of Lim	nited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	n all correspo	ndence concerning this matter	to the following:	
		KURT WESTFIELD		
			Name of Person	
		FLORIDA ASSET MANA	AGEMENT FIRM, LLC	
			Firm/Company	
		3030 ROCKY POINT		
			Address	
		TAMPA, FL 33607		
			City/State and Zip Code	
		KURT@FAMFIRM.COM		
For further in	nformation co	E-mail address: (oncerning this matter, please c	to be used for future annual report no all:	tification)
KURT WES	STFIELD		813 865-3091	
	Name of	f Person	at () Area Code Daytii	me Telephone Number
Enclosed is a	a check for th	e following amount:		
■ \$25.00 F	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
	Registra Divisio P.O. Bo	ING ADDRESS: ation Section of Corporations ox 6327 ssee, FL 32314	STREET/COUR Registration Section Division of Corporation Building 2661 Executive Country Tallahassee, FL 3	orations Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF ST TALLAHASSFE. FLI	15 JUN 22 AH 10:	
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FLORIDA ASSET MANAGEMENT FIRM, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company Florida document number <u>L13000142478</u> .	were filed on 10/09/2013	and assigned
Tronda document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company " the designation "I I C" or	the abbreviation "I I C"
	12906 TAMPA OAKS BLVD, SU	
Enter new principal offices address, if applicable:		711E 100
(Principal office address MUST BE A STREET ADDRESS)	TEMPLE TERRACE, FL 33637	
Enter new mailing address, if applicable:	12906 TAMPA OAKS BLVD, SU	JITE 100
<i>y</i> 11	TEMPLE TERRACE, FL 33637	·····
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		nter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	8
	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	KURT WESTFIELD	3030 ROCKY POINT	= Add
		TAMPA, FL 33607	□ Remove
			Change
MGRM	PETER MURPHY	12906 TAMPA OAKS BLVD, SU	= Add
		TEMPLE TERRACE, FL 33637	□ Remove
			Change
MGRM	CHASE CLARK	12906 TAMPA OAKS BLVD, SU	Add
		TEMPLE TERRACE, FL 33637	□ Remove
			Change
MGRM	NICK PARRINELLO	5383 PRIMROSE LAKE	
		TAMPA, FL 33647	■ Remove
			☐ Change
			SECRETAR OF STATE Remove Remove
			□ Change

KURT WESTFIELD REMAI	NO AC COLINIDED	AND MCDM		
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Filing Fee: \$25.00