

L13000147582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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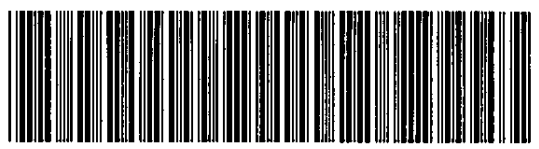
(Business Entity Name)

(Document Number)

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2014 APR 21 PM 3:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR 24 2014

J. BRUCE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 21, 2014

ZACH MCCORMICK  
ZACH MACCORMICK ATTORNEY AT LAW, LLC  
210 N. TEXAS AVE.  
TAVARES, FL 32778

SUBJECT: ZACH MCCORMICK ATTORNEY AT LAW LLC  
Ref. Number: L13000147582

We have received your document for ZACH MCCORMICK ATTORNEY AT LAW 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):

The specific purpose of the entity must be set forth in the document.

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.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 114A00008434

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Zach McCormick Attorney at Law, 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:

**Zach McCormick**  
Name of Person  
**Zach McCormick Attorney at Law, LLC**  
Firm/Company  
**210 N. Texas Ave.**  
Address  
**Tavares, FL 32778**  
City/State and Zip Code  
**ZJMLAW@GMAIL.COM**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Zach McCormick** at **(352) 7427474**  
Name of Person Area Code Daytime Telephone Number

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TALLAHASSEE, FLORIDA

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

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

Zach McCormick Attorney at Law, 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 10/21/2013 and assigned Florida document number L1300147582.

This amendment is submitted to amend the following:

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

Zach McCormick Attorney at Law, PLLC

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:

210 N. Texas Ave.

**(Principal office address MUST BE A STREET ADDRESS)**

Tavares, FL 32778

Enter new mailing address, if applicable:

PO Box 1116

**(Mailing address MAY BE A POST OFFICE BOX)**

Tavares, FL 32778

**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:

Zach McCormick

New Registered Office Address:

210 N. Texas Ave.

Enter Florida street address

Tavares

City

Florida 32778

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

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2014 APR 21 PM 4:00  
TAVARES, FL  
CLERK OF CIRCUIT COURT



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

Purpose of PLLC: To provide legal services.

\*Check for \$25 was already transmitted with initial filing

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated April 11th, 2014



Signature of a member or authorized representative of a member

Zach McCormick

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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PALEMBASSER FLORIDA

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