# L14000014186

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ACCOUNT NO. : I2000000195

REFERENCE : 975707

AUTHORIZATION \_

COST LIMIT

ORDER DATE: January 26, 2014

ORDER TIME : 12:24 PM

ORDER NO. : 975707-005

CUSTOMER NO: 7978551

#### DOMESTIC AMENDMENT FILING

NAME:

PROGRESSIVE STERILIZATION

SOLUTIONS, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes -- EXT# 52920

EXAMINER'S INITIALS:

## STATMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

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Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

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### Electronic Articles of Organization For Florida Limited Liability Company

L14000014186 FILED 8:00 AM January 27, 2014 Sec. Of State tcline

#### Article I

The name of the Limited Liability Company is: STENDER IMMIGRATION GROUP, LLC

#### **Article II**

The street address of the principal office of the Limited Liability Company is:

13904 LYNMAR BLVD TAMPA, FL. 33626

The mailing address of the Limited Liability Company is:

13904 LYNMAR BLVD TAMPA, FL. 33626

#### **Article III**

The name and Florida street address of the registered agent is:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL. 32301

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: DEB REEVES

#### **Article IV**

• The name and address of person(s) authorized to manage LLC:

Title: AMBR MICHELE E MAUZERALL 13904 LYNMAR BLVD TAMPA, FL. 33626

Title: AMBR MARYELLEN KEENAN 13904 LYNMAR BLVD TAMPA, FL. 33626 L14000014186 FILED 8:00 AM January 27, 2014 Sec. Of State tcline

Signature of member or an authorized representative

Electronic Signature: MICHELE E MAUZERALL

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.