

L14000054269

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

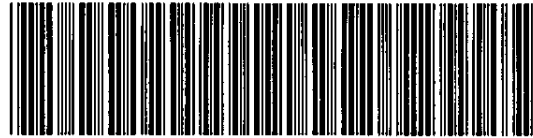
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR 11 2013

T. HAMPTON

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: THE MENLO GROUP, 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:

**ROGER B. RICE, ESQ., REGISTERED AGENT**

Name of Person

**ROGER B. RICE, P.A.**

Firm/Company

**9010 STRADA STELL COURT, SUITE 207**

Address

**NAPLES, FLORIDA 34109**

City/State and Zip Code

**JAMES.BETZWIESER@GE.COM**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**ROGER B. RICE, ESQ., R.A.**

Name of Person

at (239) 593-1002

Area Code

Daytime Telephone Number

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**

**THE MENLO GROUP, 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 APRIL 02, 2014 and assigned  
Florida document number L14000054269.

This amendment is submitted to amend the following:

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

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:**

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

9889 CYPRESSWOOD DRIVE

UNIT 3212

HOUSTON, TEXAS 77070

**Enter new mailing address, if applicable:**

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

9889 CYPRESSWOOD DRIVE

UNIT 3212

HOUSTON, TEXAS 77070

**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:

New Registered Office Address:

*Enter Florida street address*

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**

At the beginning of the calendar year, the Manager of the Department shall review the records of the Department and, if necessary, remove the name and address of each Manager of an Authorized Member being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	JAMES BETZWIESER	197 MENLO PARK RD	<input type="checkbox"/> Add
		NISKAYUNA, NY 12309	<input checked="" type="checkbox"/> Remove
MGR	JAMES BETZWIESER	9889 CYPRESSWOOD DRIVE	<input checked="" type="checkbox"/> Add
		UNIT 3212	<input type="checkbox"/> Remove
		HOUSTON, TEXAS 77070	
MGR	LINDA BETZWIESER	197 MENLO PARK RD	<input type="checkbox"/> Add
		NISKAYUNA, NY 12309	<input checked="" type="checkbox"/> Remove
MGR	LINDA BETZWIESER	9889 CYPRESSWOOD DRIVE	<input checked="" type="checkbox"/> Add
		UNIT 3212	<input type="checkbox"/> Remove
		HOUSTON, TEXAS 77070	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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By transmitting any other information, such as change(s) of name (attach additional sheets, if necessary),

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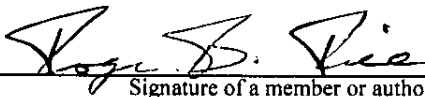
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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**  
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated \_\_\_\_\_, \_\_\_\_\_.



Signature of a member or authorized representative of a member

ROGER B. RICE, ESQ. authorized agent of JAMES RETZIESER, MGR  
Typed or printed name of signee

Page 3 of 3  
Filing Fee: \$25.00

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