

L14000074595

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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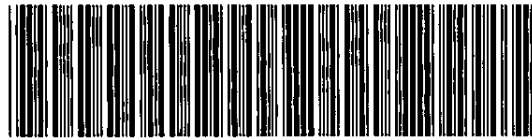
(Business Entity Name)

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TALLAHASSEE, FLORIDA

JUN 10 2014

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mederos Legal, PLLC
Name of the Limited Liability Company as it now appears on any records and assigned
5/7/14

COVER LETTER

TO: Registration Section
Division of Corporations

Mederos Legal, PLLC

Name of Limited Liability Company

SUBJECT:

The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:

Diana Mederos
Name of Person
Mederos Legal, PLLC
Firm/Company
301 W. Bay St. Ste. 14139
Address
Jacksonville, FL 32202
City/State and Zip Code
diana@mederoslegal.com
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:
Diana Mederos
Name of Person
904 236-6098
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:
☒ \$25.00 Filing Fee
☐ \$30.00 Filing Fee & Certificate of Status

☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

☐ \$35.00 Filing Fee & Certified Copy (additional copy is enclosed)

STREET/COURT ADDRESS:

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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6011 277

The Articles of Organization for this Limited Liability Company were filed on 11/06/07/4595
Florida document number

This amendment is submitted to amend the following:

The new name shall be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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

The new name shall be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal office address, if applicable:

Principal office address MUST BE A STREET ADDRESS

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

City

State

Zip Code

Florida 32202

301 W. Bay St. Ste. 14139

Enter Florida street address

Florida 32202

301 W. Bay St. Ste. 14139

Enter Florida street address

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Florida 32202

301 W. Bay St. Ste. 14139

Enter Florida street address

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.

New Registered Agent's Signature: If the new Registered Agent is a person, please sign. If the new Registered Agent is a company, please sign. If the new Registered Agent is a company, please sign.

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		Type of Action	
Title	Name	Address	
AMBR	Diana F. Mederos	301 W. Bay St.	☐ Add
		Ste. 14139	☐ Remove
		Jacksonville, FL 32202	☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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01 JUN 11 2014

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
FEIN: 46-5599115

E. Effective date, if other than the date of filing:
(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 June 2, 2014
Signature of a member or authorized representative of a partner: 
Typed or printed name of signer: Diana F. Mederos