## L140000 83253

<del></del>	(Requestor's Name)
	(Address)
<u></u>	(Address)
	(City/State/Zip/Phone #)
PICK-UF	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:
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## **COVER LETTER**

Div	ision of Corpor	rations			
CUDIECT.		ARCH SOLUTIONS, LLC			
SUBJECT:					
The enclose	d Articles of An	nendment and fee(s) are subm	itted for filing.		
Please return	all correspond	ence concerning this matter to	o the following:		
		GERALDINE REED			
			Name of Person		
		FLORIDA SEARCH SOLU	JTIONS, LLC		
			Firm/Company		E.S. 5
		7378 HIAWATHA PARKV	WAY		到的
			Address		路 西
		SPRING HILL, FL 34606			世界 57 大阪 12 3 43 13 15 15 15 15 15 15 15 15 15 15 15 15 15
			City/State and Zip Code		
		floridasearchsolutions@gma	il.com  be used for future annual report noti	ification)	
For further	nformation con	cerning this matter, please ca	*, *	·	•
GERALDI	NE REED		352 600-8844		
	Name of P	erson		ne Telephone Number	<del></del>
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)	Certified	te of Status &

**Registration Section** 

TO:

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

FLORIDA SEARCH SOLUTION	S, LLC			
(Name of the Limi	ited Liability Compa (A Florida Limited)	ny as it now appears Liability Company)	on our records.)	<del></del>
The Articles of Organization for this Limited I Florida document number L14000083253	Liability Company	were filed on MA	Y 21, 2014	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	oility company her	<u>e</u> :	
N/A				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the des	signation "LLC" or the abbrev	ation "L.L.C."
Enter new principal offices address, if appli	cable:	N/A		
Principal office address MUST BE A STRE	ET ADDRESS)			
	•			ं दंत
Enter new mailing address, if applicable:		N/A		SEP T
Mailing address MAY BE A POST OFFICE	E BOX)		in the second se	8 TI
				를 보 다 92
B. If amending the registered agent and registered agent and/or the new registered of			our records, enter the	
Name of New Registered Agent:	GERALDINE	REED		
New Registered Office Address:	7378 HIAWA	THA PARKWAY		
		Enter Florid	da street address	
	SPRING HILI	·	, Florida <u>34</u> 606	
		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
AMBR	ROBERT W. REED	7378 HIAWATHA PARKWAY	
		SPRING HILL,FL 34606	Remove
			Change
			□ Remove
			☐ Change
			Add
			Remove
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						芸芸で
Effective date, if other (If an effective date is listed, the	than the date of ne date must be specificated	filing:	or to date of filing o	more than 90 day	( <b>optional)</b> is after filing.) I	Sursuant to 605.
Note: If the date inserted document's effective date	in this block does	not meet the appl	icable statutory fi	ling requirement	s, this date w	ill not be liste
document 3 effective quie	on the Departmen	it of State 3 leaste				開日中
the record specifies a	delayed effecti	ive date, but n	ot an effective	e time, at 12	:01 a.m. o	n the earlie
) The 90th day after						選用を
SEPTEMBER 22		2015				,
Dated	/,		<b>-</b> ~·			
	Gera	edire P	ud.			
<del></del>	Signature	e of a member or au	horized representat	ive of a member		<del></del>

Page 3 of 3

Filing Fee: \$25.00