#114000096384

(Re	questor's Name)	
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2015 JUN 19 PH 4: 28

K.SALY EXAMINER JUN 22 2015



June 9, 2015

PETERSON, BALDOR & MARANGES, PLLC MICHAEL P PETERSON 8000 SW 117TH AVE, STE. 206 MIAMI, FL 33183

SUBJECT: PETERSON FAMILY ENTERPRISES, LLC

Ref. Number: L14000096384

We have received your document for PETERSON FAMILY ENTERPRISES, 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):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Letter Number: 415A00012106

Karen A Saly Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Division of	on Section Corporations
Peterso	on Family Enterprises, LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Article	es of Amendment and fee(s) are submitted for filing.
Please return all corr	respondence concerning this matter to the following:
	Michael P. Peterson
	Name of Person
	Peterson, Baldor & Maranges, PLLC
	Firm/Company
	8000 SW 117th Avenue, Suite 206
	Address
	Miami, Florida 33183
	City/State and Zip Code
	michael@pbmlegal.net ·
	E-mail address: (to be used for future annual report notification)
For further informati	on concerning this matter, please call:
Michael P. Peterson	305 270-3773 at ()
Na	me of Person Area Code Daytime Telephone Number
Enclosed is a check f	for the following amount:
■ \$25.00 Filing Fe	e Sand Filing Fee & Sand Filing Fee & Sand Filing Fee & Sand Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

FILED
2015 JUN 19 PM 4:28

Peterson Family Enterprises, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Compa	ny were filed on	4 and assigned			
Florida document number L14000096384					
This amendment is submitted to amend the following:					
A. If amending name, <u>enter the new name of the limited li</u>	ability company here:				
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the designation	on "L.I.C" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	8000 SW 117th Avenue	e			
(Principal office address MUST BE A STREET ADDRESS)	Suite 206	<u> </u>			
	Miami, Florida 33183				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)					
B. If amending the registered agent and/or registered		records, enter the name of the r			
registered agent and/or the new registered office address h	<u>ere</u> ;				
Name of New Registered Agent: Peterson, Ba	Peterson, Baldor & Maranges, PLLC				
New Registered Office Address: 8000 SW 11	7th Avenue, Suite 206				
	Enter Florida stree	t address			
Miami		, 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 Now Registered Agen

Page 1 of 3

or removed from our records: Filler (F) MGR = Manager AMBR = Authorized Member 2015 JUN 19 PM 4:28 **Type of Action** <u>Title</u> <u>Name</u> <u>Address</u> SECRETARY OF STATE FALLAHASSEE FI BRID/ ☐ Add □ Remove _□ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change _□ Add ☐ Remove ☐ Change _□ Add □ Remove

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

☐ Change

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ctive date, if other effective date is listed, t	he date must be specific	and cannot be	prior to date o	f filing or mo	re than 90 days a	after filing.) Pu	rsuant to 605.02
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Page 3 of 3

Filing Fee: \$25.00