

L150000 81723

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

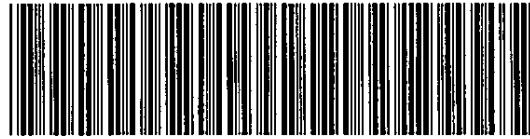
(Business Entity Name)

(Document Number)

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AUG 05 2015
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: George Stuart Legal Supplies, 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:

Jacob V. Stuart, Jr.
Name of Person
George Stuart Legal Supplies, LLC
Firm/Company
PO BOX 1471
Address
Orlando, FL32801
City/State and Zip Code
jacobstuart@me.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacob V. Stuart, Jr. at 407 416-5987
Name of Person 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**

George Stuart Legal Supplies, 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 May 8, 2015 and assigned Florida document number 115000081723.

This amendment is submitted to amend the following:

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

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

P.O. Box 1471

(Mailing address MAY BE A POST OFFICE BOX)

Orlando, FL 32801

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CORPORATION
TALLAHASSEE, FLORIDA

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:

N/A

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

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Christopher Kaigle	PO Box 1471	<input checked="" type="checkbox"/> Add
		Orlando, FL 32801	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Charity Tonelli	PO Box 1471	<input checked="" type="checkbox"/> Add
		Orlando, FL 32801	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Bruce Mount, Jr.	PO Box 1471	<input checked="" type="checkbox"/> Add
		Orlando, FL 32801	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Brett Lindenberg	PO Box 1471	<input checked="" type="checkbox"/> Add
		Orlando, FL 32801	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	<i>Thomas Dunne</i>	PO Box 1471	<input checked="" type="checkbox"/> Add
		Orlando, FL 32801	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 CLERK OF DISTRICT COURT
 JUDICIAL DISTRICT NO. 1
 ORLANDO, FLORIDA

