

L15006 097416

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

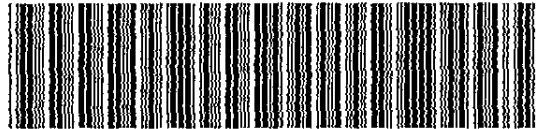
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000278001920

10/15/15--01004--011 **25.00

COVER LETTER

TO: Registration Section,
Division of Corporations

SUBJECT: Structural Solutions Consulting Engineers, 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:

Patrick McKee

Name of Person

Structural Solutions Consulting Engineers, LLC

Firm/Company

907 Shadowlawn Dr

Address

Tallahassee, Florida, 32312

City/State and Zip Code

PMcKee@structrualsolutions.biz

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

For further information concerning this matter, please call:

Patrick McKee

850 228-6285
at ()

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**

Structural Solutions Consulting Engineers, 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 06/03/2015 and assigned
Florida document number L15000097416

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 contain 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3370 Capitol Circle NE, Suite F

Tallahassee, Florida 32308

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:

3370 Capitol Circle N.E., Suite F

Enter Florida street address

Tallahassee

City

Florida 32308

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>
AMBR	Brian Kever	1587 Copperfield Cir, Tallahassee,	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

1. The first part of the document is a header section containing the following information:

- Page Number: 1
- Date: 10/10/2010
- Time: 10:10:10
- Author: [Name]
- Subject: [Subject]

2. The second part of the document is a table with the following columns:

Item	Value
1	10
2	20
3	30
4	40
5	50
6	60
7	70
8	80
9	90
10	100

3. The third part of the document is a list of items:

- Item 1: [Description]
- Item 2: [Description]
- Item 3: [Description]
- Item 4: [Description]
- Item 5: [Description]
- Item 6: [Description]
- Item 7: [Description]
- Item 8: [Description]
- Item 9: [Description]
- Item 10: [Description]

4. The fourth part of the document is a table with the following columns:

Item	Value
1	10
2	20
3	30
4	40
5	50
6	60
7	70
8	80
9	90
10	100

5. The fifth part of the document is a list of items:

- Item 1: [Description]
- Item 2: [Description]
- Item 3: [Description]
- Item 4: [Description]
- Item 5: [Description]
- Item 6: [Description]
- Item 7: [Description]
- Item 8: [Description]
- Item 9: [Description]
- Item 10: [Description]

6. The sixth part of the document is a table with the following columns:

Item	Value
1	10
2	20
3	30
4	40
5	50
6	60
7	70
8	80
9	90
10	100

7. The seventh part of the document is a list of items:

- Item 1: [Description]
- Item 2: [Description]
- Item 3: [Description]
- Item 4: [Description]
- Item 5: [Description]
- Item 6: [Description]
- Item 7: [Description]
- Item 8: [Description]
- Item 9: [Description]
- Item 10: [Description]

8. The eighth part of the document is a table with the following columns:

Item	Value
1	10
2	20
3	30
4	40
5	50
6	60
7	70
8	80
9	90
10	100

9. The ninth part of the document is a list of items:

- Item 1: [Description]
- Item 2: [Description]
- Item 3: [Description]
- Item 4: [Description]
- Item 5: [Description]
- Item 6: [Description]
- Item 7: [Description]
- Item 8: [Description]
- Item 9: [Description]
- Item 10: [Description]

10. The tenth part of the document is a table with the following columns:

Item	Value
1	10
2	20
3	30
4	40
5	50
6	60
7	70
8	80
9	90
10	100

11. The eleventh part of the document is a list of items:

- Item 1: [Description]
- Item 2: [Description]
- Item 3: [Description]
- Item 4: [Description]
- Item 5: [Description]
- Item 6: [Description]
- Item 7: [Description]
- Item 8: [Description]
- Item 9: [Description]
- Item 10: [Description]

12. The twelfth part of the document is a table with the following columns:

Item	Value
1	10
2	20
3	30
4	40
5	50
6	60
7	70
8	80
9	90
10	100

13. The thirteenth part of the document is a list of items:

- Item 1: [Description]
- Item 2: [Description]
- Item 3: [Description]
- Item 4: [Description]
- Item 5: [Description]
- Item 6: [Description]
- Item 7: [Description]
- Item 8: [Description]
- Item 9: [Description]
- Item 10: [Description]

14. The fourteenth part of the document is a table with the following columns:

Item	Value
1	10
2	20
3	30
4	40
5	50
6	60
7	70
8	80
9	90
10	100

15. The fifteenth part of the document is a list of items:

- Item 1: [Description]
- Item 2: [Description]
- Item 3: [Description]
- Item 4: [Description]
- Item 5: [Description]
- Item 6: [Description]
- Item 7: [Description]
- Item 8: [Description]
- Item 9: [Description]
- Item 10: [Description]

16. The sixteenth part of the document is a table with the following columns:

Item	Value
1	10
2	20
3	30
4	40
5	50
6	60
7	70
8	80
9	90
10	100

17. The seventeenth part of the document is a list of items:

- Item 1: [Description]
- Item 2: [Description]
- Item 3: [Description]
- Item 4: [Description]
- Item 5: [Description]
- Item 6: [Description]
- Item 7: [Description]
- Item 8: [Description]
- Item 9: [Description]
- Item 10: [Description]

18. The eighteenth part of the document is a table with the following columns:

Item	Value
1	10
2	20
3	30
4	40
5	50
6	60
7	70
8	80
9	90
10	100

19. The nineteenth part of the document is a list of items:

- Item 1: [Description]
- Item 2: [Description]
- Item 3: [Description]
- Item 4: [Description]
- Item 5: [Description]
- Item 6: [Description]
- Item 7:

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Signature of a member

PATRICK MCKEE, PE

Filing Fee: \$25.00