

# Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000229866 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: AKERMAN LLP - BOCA Account Name

Account Number : I20100000049 Phone

: (561)368-2151

Fax Number

: (561)368-4668

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

a akerman . com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THE PAUL MILLER FAMILY INVESTMENTS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

Help

H150002298663

# ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

The Paul Miller Family Investments, LLC	
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)
The Articles of Organization for this Limited Liability Company w	ere filed on July 22, 2015 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabili	ty company here:
MILCUR, LLC	
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)	15 SEP 24 SEUWE TARY
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our records, enter the name of the new
Name of New Registered Agent:	
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

Page 1 of 3

H150002298663

### 2015/09/24 11:07:30 3 /4

H15000 2298663

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 = M $AMBR = A$	lanager authorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Remove
			Change
4			□ Add
			☐ Remove
			☐ Change
			□ Abd
			□ Remove
		<del> </del>	ALI Charge
			AHADAD 21
			TO-Rem TO
			Section 5
			D Add
			☐ Remove
			□ Change
	· · · · · · · · · · · · · · · · · · ·		□ Add
	,		□ Remove
			Chanca

H150002298663

Page 2 of 3

## 2015/09/24 11:07:30 4 /4

H150002298663

Effective date, if other than the date of filing:	PALLAHASSEE, FLORE		
Effective date, if other than the date of filing:	SEE. F	SEP 24 AM	
Effective date, if other than the date of filing:	SEE. F	SEP 24 AM	
Effective date, if other than the date of filing:	SEE. F	SEP 24 AM	
Effective date, if other than the date of filing:	SEE. F	SEP 24 AM	
Effective date, if other than the date of filing:	SEE. F	SEP 24 AM	
Effective date, if other than the date of filing:	SEE. F	SEP 24 AM	
Effective date, if other than the date of filing:	SEE. F	SEP 24 AM	
Effective date, if other than the date of filing:	SEE. F	SEP 24 AM	
Effective date, if other than the date of filing:	SEE. F	2	_
Effective date, if other than the date of filing:	SEE. F	2	V mar de V
Effective date, if other than the date of filing:	<u> </u>		<b>1</b>
Effective date, if other than the date of filing:  (lf 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.  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.			Ţ
Effective date, if other than the date of filing:  (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.  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	70.7	4.	C
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.  the record specifies a delayed effective date, but not an effective time, at 12:01 a.m.:	D A		
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m.: ) The 90th day after the record is filed.	Pursuant to 60	5.0207 (3 ted as the	)(b) ÷
	n the earl	ler of:	
Dated September 23, 2015  Signature of a member of authorized representative of a member			
PAUL BENNETT MILLER			

Page 3 of 3

Filing Fee: \$25.00

H150002298663