## L15000 142050

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·
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## **COVER LETTER**

	egistration Se ivision of Corp				
SUBJECT	PEAK Brok	crage Services	<u>-</u>		
Name of Limited Liability Company					
The enclos	sed Articles of	Amendment and fcc(s) are subm	nitted for filing.		
Please retu	ırn all correspo	ndence concerning this matter t	to the following:		
		Glen McRary			
	Name of Person				
		PEAK Brokerage Services			
			Firm/Company		
		11770 US Highway 1 N, Ste. 205E			
			Address		
		Palm Beach Gardens, FL 33408			
		City/State and Zip Code gmcrary@peakbroker.com			
			o be used for future annual report notif	ication)	
For further	r information c	oncerning this matter, please co	dl:		
Glen McR	ary		561 641-5050 at ()		
	Name o	f Person	Arca Code Daytime	e Telephone Number	
Enclosed i	is a check for th	ne 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

PEAK Brokerage Services		
(Name of the Limited Li (A F	iability Company as it now appears on our reco fords Limited Lisbility Company)	rds.)
The Articles of Organization for this Limited Liabili Florida document number L15000142050	ity Company were filed on 08/20/2015	and assigned
Florida document number	··	
This amendment is submitted to amend the following	g:	
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 "Li	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	<b></b>	)
(Principal office address MUST BE A STREET A	DDRESS)	
		en e
		<b>公室 ム</b>
Enter new mailing address, if applicable:		Me to the
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	5º 2 7
		<u> </u>
B. If amending the registered agent and/or a	renistered affice address an aur recoi	rds enter the name of the new
registered agent and/or the new registered office		on on the minute of the new
Name of New Registered Agent:		
Navy Dogletand Office Address		
New Registered Office Address:	Enter Florida street add	ress
		Florida
	Ciŋ·	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
MGR	Glen McRary	321 Leeward Drive, Jupiter, FL	⊒ Add
			☐ Remove
			□ Change
MGR	Glenn Wiggle	338 Caravalle Drive, Jupiter FL	■ Add
			☐ Remove
			☐ Change
			□ Remove
			Change
			Add
			□ Remove
			Change S
			D`Add ┌──
			Rémove
			☐ Change O
<del></del>			
			□ Remove
			Change

D. If amendi	ling any other information, enter change(s) here: (Attach additional	sheets, if necessary.)
	·	
·		
		<del> </del>
	<u> </u>	
<del></del>		
E. Effective (If an effecti Note: If t document	e date, if other than the date of filing: ive date is listed, the date must be specific and cannot be prior to date of filing or more to the date inserted in this block does not meet the applicable statutory filing rec t's effective date on the Department of State's records.	(optional) han 90 days after filing.) Pursuant to 605.0207 (3)(b) quirements, this date will not be listed as the
	rd specifies a delayed effective date, but not an effective time Oth day after the record is filed.	e, at 12:01 a.m. on the earlier of:
Dated	12/31/2015.  Objective of a member or adult-orded representative of a	member
	Typed or printed name of signee	\$ 17.5 E
	Page 3 of 3	£ ω #
	Filing Fee: \$25.00	PH 2: 16
		, D