

L15000149392

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

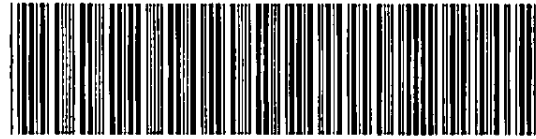
(Business Entity Name)

(Document Number)

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*[Signature]*  
9/15/17

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17 SEP 15 PM 1:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 29, 2017

JESSE A. OUTLAW  
1245 HEWLETT PLAZA #252  
HEWLETT, NY 11557 US

SUBJECT: OUTLAW, BRUNO & ASSOCIATES, LLC  
Ref. Number: L15000149392

We have received your document for OUTLAW, BRUNO & ASSOCIATES, 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of 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) 254-6051.

Judy A Leggett  
Regulatory Specialist II  
Registration Section

Letter Number: 617A00017838

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2017 SEP 15 AM 10:02  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

OUTLAW, BRUNO & ASSOCIATES, LLC

**SUBJECT:** \_\_\_\_\_  
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:

JESSE A. OUTLAW

\_\_\_\_\_  
Name of Person

OUTLAW & COMPANY FAMILY OFFICE, LLC

\_\_\_\_\_  
Firm/Company

1245 HEWLETT PLAZA #252

\_\_\_\_\_  
Address

HEWLETT, NY 11557

\_\_\_\_\_  
City/State and Zip Code

JesseOutlaw03@gmail.com

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

For further information concerning this matter, please call:

JESSE A. OUTLAW

786 682-9268  
at ( ) \_\_\_\_\_  
Area Code Daytime Telephone Number

\_\_\_\_\_  
Name of Person

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

OUTLAW, BRUNO & ASSOCIATES, 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 09/04/2015 and assigned  
Florida document number 115000149392

This amendment is submitted to amend the following:

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

OUTLAW & COMPANY FAMILY OFFICE, 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)

1245 HEWLETT PLAZA #252

HEWLETT, NY 11557

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

1245 HEWLETT PLAZA #252

HEWLETT, NY 11557

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**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:

*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>
AMBR	BRUNO, CARLYLE	7141 NW 45TH COURT	<input type="checkbox"/> Add
		LAUDERHILL, FL 33319	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	JESSE A. OUTLAW	1245 HEWLETT PLAZA #252	<input type="checkbox"/> Add
		HEWLETT, NY 11557	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	DOMINIQUE GEHY OUTLAW	1245 HEWLETT PLAZA #252	<input type="checkbox"/> Add
		HEWLETT, NY 11557	<input type="checkbox"/> Remove
			<input checked="" 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

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated AUGUST 21, 2017

Signature of a member or authorized representative of a member

JESSE A. OUTLAW

Typed or printed name of signee