

L15000155660

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## **Cover Letter**

Eric C Wheeler

(904)-624-2935

Return Address:

9776 SUMMER GROVE WAY W #101

JACKSONVILLE, FL 32257

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** The Acquisition Edge 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:

Eric C. Wheeler  
Name of Person

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

9776 Summergrove Way W #101  
Address

Jacksonville, FL 32257  
City/State and Zip Code

eric.c.wheeler@me.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eric C. Wheeler at (904) 624-2935  
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**

The Acquisition Edge 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 9/11/2015 and assigned Florida document number L15000155660.

This amendment is submitted to amend the following:

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

The Brilmore Group 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)

9776 Summergrove Way W #101  
Jacksonville, FL 32257

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9776 Summergrove Way #101  
Jacksonville, FL 32257

**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:

Eric C. Wheeler

New Registered Office Address:

9776 Summer Grove Way W #101

Enter Florida street address

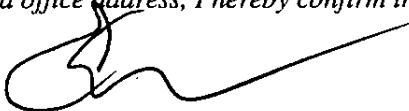
Jacksonville, Florida 32257

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	Eric C. Wheeler	4496 Ellipse Dr.	<input type="checkbox"/> Add
		Jacksonville, FL 32246	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Eric Wheeler	9776 Summer Grove Way W	<input checked="" type="checkbox"/> Add
		#101	<input type="checkbox"/> Remove
		Jacksonville, FL 32257	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change


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TALLAHASSEE, FLORIDA

**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.

Dated Oct 28, 2016



Signature of a member or authorized representative of a member

Eric C Wheeler

Typed or printed name of signee