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COVER LETTER

TO:		istration Sect sion of Corpe							
SUBJE		SANDERS-RANDALL & ASSOCIATES, PLLC							
SUBJE	CI.		Name of Lim	ited Liability Company					
The enc	losed	Articles of A	mendment and fee(s) are sub-	mitted for filing.					
Please re	eturn	all correspond	lence concerning this matter	to the following:					
			MICHAEL SANDERS-RA	ANDALL					
				Name of Person	· · · · · · · · · · · · · · · · · · ·				
				Firm/Company					
	1031 CASCADE CIRCLE, APT #111								
		ROCKLEDGE, FL 32955							
	City/State and Zip Code								
			msanders.randall@gmail.com	m to be used for future annual re					
For furti	ner in:	formation con	cerning this matter, please ca		port notification)	2016			
МІСНА	EL S	ANDERS-RA		321 288- at ()	5890 A i	EB			
Enclosed	d is a	Name of P	erson following amount:	Area Code	Daytime Telephone Number				
\$25.			□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificat sed) Certified	ing Fee, e of Status &			

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

SANDERS-RANDALL & ASSOCIATES, P	PLLC	
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)	
ne Articles of Organization for this Limited Liability C	Company were filed on 02/09/2016	and assigned
orida document number <u>44000 27558</u>	_·	
is amendment is submitted to amend the following:		
If amending name, enter the new name of the limi	ited liability company here:	
ANDERS-RANDALL & RICE, PLLC		
e new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or the ab-	breviation "L.L.C."
nter new principal offices address, if applicable:		
rincipal office address MUST BE A STREET ADDR	PECC)	
nter new mailing address, if applicable:		
failing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or regist	tered office address on our records, entere	the name of the
gistered agent and/or the new registered office addr	ress here:	
]	
Name of New Registered Agent:	35- 673	
reality of the region of a figure.	[T]	
New Registered Office Address:	Let.	<u>े</u> जि
	Enter Florida street address	
	· , Florida 💆	A
4 - 1	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>	Type of Action
MGR	STEVEN RICE	1433 LARAMIE CIRCLE	□ Add
		MELBOURNE, FL 32940	□ Remove
			Change
			□ Add
			Remove
			☐ Change
			Add
			Remove
			☐ Change
			AHE IS CARRIED Add A
			SSE 20 Remove E O A Change 28
			28 □ Add
		***	□ Remove
			☐ Change
***************************************			Add
			☐ Remove
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to da		(optio	nal)	
an effective date is listed, the date must be specific and cannot be prior to da ote: If the date inserted in this block does not meet the applicable	te of filing or more than 90 statutory filing requirem	days after ents, this	filing.) P date wi	ursuant to 605.02 If not be listed
ocument's effective date on the Department of State's records.	olulatoryg require			
e record specifies a delayed effective date, but not an The 90th day after the record is filed.	effective time, at :	l2:01 a	.m. or	the earlier
ated February 25	1 /			
ated	//			
$M \cup XV - VW$	1 /	 er		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00