

L16000124062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

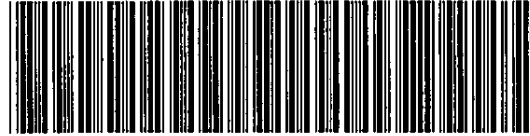
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

R-A-Sign

Office Use Only



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2016 SEP 13 P 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

S Warren

SEP 14 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 31, 2016

PETER D. GRAHAM, ESQUIRE
ZACUR, GRAHAM & COSTIS, P.A.
5200 CENTRAL AVENUE
ST. PETERSBURG, FL 33707

SUBJECT: ACCURACY & PRECISION INTERNATIONAL, LLC
Ref. Number: L16000124062

We have received your document for ACCURACY & PRECISION INTERNATIONAL, 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 registered agent must sign accepting the designation.

Please return 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) 245-6051.

Stacey M Warren
Regulatory Specialist II

Letter Number: 916A00018586

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Accuracy & Precision International, 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:

Peter D. Graham, Esquire

Name of Person

Zacur, Graham & Costis, P.A.

Firm/Company

5200 Central Avenue

Address

St. Petersburg, FL 33707

City/State and Zip Code

pdgatty@gmail.com

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

u
MARcello
NAME changed
to "MARcello"
(1 - L now)

For further information concerning this matter, please call:

Peter D. Graham, Esquire

727
at ()

328-1000

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**

Accuracy & Precision International, 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 June 28, 2016 and assigned
Florida document number L16000124062M.

This amendment is submitted to amend the following:

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 "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)

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:

Marcelo Rafaniello

New Registered Office Address:

2008 Pass-A-Grille Way

Enter Florida street address

St. Pete Beach

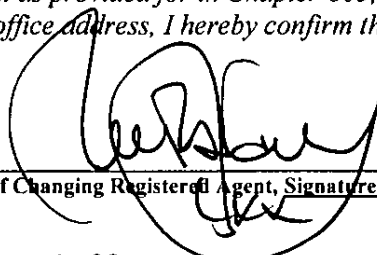
, Florida 33706

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	Marcelo Rafaniello	2008 Pass-A-Grille Way	☐ Add
		St. Pete Beach, FL 33706	☐ Remove
			☒ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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			☐ Add
			☐ Remove
			☐ Change

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 JUN 10 3 40 PM '09
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

[illegible]

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 Aug. 25, 2016

Signature of a member or authorized representative of a member

Typed or printed name of signee

FILED
2018 DEC 3 P 2:40
CLERK OF STATE
TALLAHASSEE, FLORIDA