

L16000173406

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

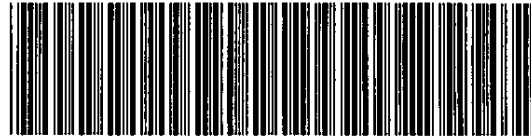
(Business Entity Name)

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TALLAHASSEE, FLORIDA

**ECKERT
SEAMANS**
ATTORNEYS AT LAW

Eckert Seamans Cherin & Mellott, LLC
Two Liberty Place
50 South 16th Street, 22nd Floor
Philadelphia, PA 19102

Joseph P. Zeidner
(215) 851-8562
jzeidner@eckertseamans.com

September 22, 2016

Via Fedex

Florida Department of State
Registration Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Fairfax Group LLC

Dear Sir/Madam:

Enclosed please find a cover letter and Articles of Amendment to Articles of Organization of Fairfax Group LLC.

Please call me if you have any questions.

Very truly yours,



Joseph P. Zeidner

JPZ/mzg
Enclosure
cc: Michael D. Ecker

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Fairfax Group 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:

Michael D. Ecker

Name of Person

Eckert Seamans Cherin & Mellott, LLC

Firm/Company

Two Liberty Place, 50 South 16th Street, 22nd Floor

Address

Philadelphia, PA 19102

City/State and Zip Code

mecker@eckertseamans.com

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

For further information concerning this matter, please call:

Michael D. Ecker

215

851-8507

at (_____) _____

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**

Fairfax Group 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 September 16, 2016 and assigned
Florida document number L16000173406.

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)

10407 Laurel Road

Davie, FL 33328

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

10407 Laurel Road

Davie, FL 33328

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:

10407 Laurel Road

Enter Florida street address

Davie

Florida 33328

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

16 SEP 23 AM 7:2
SECRETARY OF STATE
FALL AN ASSOCIATE F. LORIDA

SECRET
U.S. DEPT. OF STATE
WASHINGTON, D.C. 20520
16 SEP 23 AM 7:2

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 September 22, 2016


Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Joseph P. Zeidner

Typed or printed name of signee