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J. HARRIS

COVER LETTER

	Registration Solution Solution Of Co.			
eud iez	Physicians	Legal Review, LLC		
SOBJEC	.l:	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Edward Schwartz		
			Name of Person	
		Physician's Legal Review		
			Firm/Company	
		33 San Jose Circle		
		ricles of Amendment and fee(s) are submitted for filing. Forrespondence concerning this matter to the following: Edward Schwartz Name of Person Physician's Legal Review Firm/Company 33 San Jose Circle Address Ormond Beach, FL 32176 City/State and Zip Code edwardbschwartz@hotmail.com E-mail address: (to be used for future annual report notification) nation concerning this matter, please call: Name of Person Paytime Telephone Number ck for the following amount:		
		Ormond Beach, FL 32176		
			City/State and Zip Code	
			·	ication)
For furthe	er information of	concerning this matter, please co	all:	
Melanie	Johnson			
	Name o	1 Person		Telephone Number
Enclosed	is a check for t	he following amount:		
■ \$25.0	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

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

Physicians Legal Review, LLC		
(Name of the Limited L. (A F	iability Company as it now appears on our records.) Iorida Limited Liability Company)	
The Articles of Organization for this Limited Liabil	ity Company were filed on December 12, 2016	and assigned
Florida document number L16000224282		
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
Physician's Legal Review, 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 A	DDRESS)	7
		2
Enter new mailing address, if applicable:		7
(Mailing address MAY BE A POST OFFICE BO)	K)	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
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		——————————————————————————————————————
B. If amending the registered agent and/or registered agent and/or the new registered office		iter the name of the nev
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		
	Enter Florida street address	
	, Florida	a
_	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>	Name	Address	Type of Action
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ecti	ve date, if other than the date of filing: (optional)
te:	petive 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 605.02 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at
cum	ent's effective date on the Department of State's records.
rec	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the eater
ha	90th day after the record is filed
ted	February 23 2017. Signature of member or authorized representative of a member Melanie Johnson, Attorn for Edward B. Schwafz, Mangy Men
	Melan Alexander

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Filing Fee: \$25.00