

L17000104144

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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D SCOTT

JUN 22 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 23, 2017

TEMPLE M BOCLAIR
15800 PINES BLVD SUITE #3111
PEMBROKE PINES, FL 33027

SUBJECT: NEW VIISION FINANCIAL CONSULTANTS, "LLC"
Ref. Number: L17000104144

RECEIVED
2017 JUN 19 PM 3:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for NEW VIISION FINANCIAL CONSULTANTS, "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):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Dionne M Pijaux
Regulatory Specialist

Letter Number: 417A00010355

FILED
17 JUN 19 PM 8:30
TALLAHASSEE, FLORIDA

Completed
06/14/2017
JB

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: New Vision Financial Consultants LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Temple M. BoClair
Name of Person

New Vision Financial Consultants
Firm/Company

15800 Pines Blvd. Suite #311
Address

Pembroke Pines FL 33027
City/State and Zip Code

templeboclair@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Temple M. BoClair at (305) 965-5904
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FILED
17
JUN 11 2008
CLERK OF COURT
TALLAHASSEE, FL

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

NEW VISION FINANCIAL CONSULTANTS "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 05/10/2017 and assigned
Florida document number L17000104144

This amendment is submitted to amend the following:

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

NEW VISION FINANCIAL CONSULTANTS 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)

15800 Pines Blvd. SUITE 3111
Pembroke Pines, FL 33027

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:

New Registered Office Address:

Enter Florida street address

Florida

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	Temple M. BoClair	15800 PINES BLVD	<input checked="" type="checkbox"/> Add
		SUITE #3111	<input type="checkbox"/> Remove
		PEMBROKE PINES, FL 33027	<input type="checkbox"/> Change
AMBR	Rufus BoClair III	15800 PINES BLVD	<input checked="" type="checkbox"/> Add
		SUITE #3111	<input type="checkbox"/> Remove
		PEMBROKE PINES, FL 33027	<input type="checkbox"/> Change
PRES	Temple M. BoClair	15800 PINES BLVD	<input type="checkbox"/> Add
		SUITE #3111	<input checked="" type="checkbox"/> Remove
		PEMBROKE PINES, FL 33027	<input type="checkbox"/> Change
VP	Rufus BoClair III	15800 PINES BLVD	<input type="checkbox"/> Add
		SUITE #3111	<input checked="" type="checkbox"/> Remove
		PEMBROKE PINES, FL 33027	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Additionally, Article I The name of the Limited Liability
Company is: New Vision Financial Consultants, "LLC"
the quotation " " marks should be removed to read,
New Vision Financial Consultants, LLC (no quote)
Without quotation marks outside the letters LLC.

- Thank you for your attention to this matter.-
Temple H. BoClair


E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated May 17, 2017.


Signature of a member or authorized representative of a member

Temple H. BoClair
Typed or printed name of signer