## LM 000 181 730

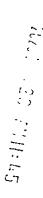
(Re	equestor's Name)	)
(Ac	ddress)	
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(Cit	ty/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	ocument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer.	
		1128

Office Use Only



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## **COVER LETTER**

TO:

TO: Registration S Division of Co		
	rvices LLC	4
SUBJECT:	Name of Lim	nited Liability Company
		-
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.
Please return all corresp	ondence concerning this matter	to the following:
	Arielle Brandt	
		Name of Person
	Brandt Services LLC	
		Firm/Company
	420 W. Wekiva Trl	
		Address
	Longwood, FL 32779	
		City/State and Zip Code
	patrickjbrandt@gmail.com E-mail address: (	to be used for future annual report notification)
For further information	concerning this matter, please c	all:
Arielle Brandt		407 808-3524 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 & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of O P.O. Box 63: Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



March 14, 2020

ARIELLE BRANDT 420 W. WEKIVA TRL LONGWOOD, FL 32779

SUBJECT: BRANDT SERVICES LLC

Ref. Number: L17000181730

We have received your document for BRANDT SERVICES 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 specific purpose of the entity must be set forth in the document.

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) 245-6050.

Letter Number: 520A00005652

Rebekah White Regulatory Specialist II Supervisor

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Brandt Services 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 I	Liability Company	v were filed on <sup>8/25/</sup>	2017 and assigned
Florida document number 1.17000181730			
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name	of the limited liab	pility company here	<b>∷</b>
The Brandt Law Firm PLLC		•	
The new name must be distinguishable and contain the	words "Limited Liab	ility Company," the desi	gnation "L1.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		420 West Wekiya Trail	
(Principal office address MUST BE A STREET ADDRESS)		Longwood, FL 32779	
(Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or agent and/or the new registered office address	registered office	address on our reco	ords, enter the name of the new register
Name of New Registered Agent: Patrick Brandt.		, Esquire	
New Registered Office Address:	420 W. Wekiva Trl		
		Enter Florida	a street address
	Longwood		Florida <sup>32779</sup>
		City	Zip Code

## gistered Agent's Signature, it 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>	Address	Type of Action
MGR Arielle Brandt	Arielle Brandt	420 West Wekiya Trail	<b>=</b> Add
	·	Longwood, FL 32779	□Remove
MGR	Patrick Brandt	420 West Wekiva Trail	
		Longwood, Fl. 32779	Remove
			□Change
			□Add
		·	□Remove
			□ Change
		<del></del>	
			Remove
			Change
	<del></del>		□Add
			□Remove
			□Change
			Remove
			Change

	other information, enter change(s) here: (Attach additional sheets. if necessary.)
Other	provisions, if any:
•	
	egal Services including but not
<u> </u>	egal Services including but not inited to representation of Clients
<del>-</del>	
(If an effective date is Note: If the date is	other than the date of filing:
the record specifies a cord is filed.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated February	18 2020
_A	Signature of a member or authorized representative of a member
/ (	Signature of a member or authorized representative of a member
Arielle	
	Typed or printed name of signee