

L19 000113178

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

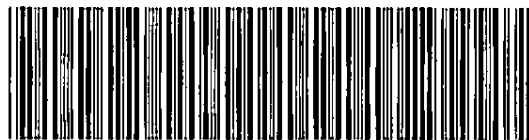
(Business Entity Name)

(Document Number)

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08/06/20--01014--010 6000.00

CLERK OF SUPERIOR COURT  
JANUARY 1, 2020

2020 AUG - 6 PM 6:06

FILED

SEP 24 2020  
S. YOUNG

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BSN Transaction Management  
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:

BRIAN MANDEL

Name of Person

Firm/Company

7892 7th Street N

Address

St. Petersburg FL 33702

City/State and Zip Code

sharee.mandel@outlook.com

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

For further information concerning this matter, please call:

BRIAN MANDEL

Name of Person

at ( 727 )

Area Code

359-6898

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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

BSN TRANSACTION MANAGEMENT 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 4/25/2019 and assigned  
Florida document number L19000113178.

FILED  
2020 AUG -6 PM 5:06  
CLERK OF CIRCUIT COURT  
IN AND FOR THE COUNTY OF  
HILLSBOROUGH, FLORIDA

This amendment is submitted to amend the following:

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

BSN MOBILE NOTARY NETWORK, 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)

7292 7th St N  
St. Petersburg FL 33702

**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:

Sharee Mandel

New Registered Office Address:

7292 7th St N

Enter Florida street address

St. Petersburg, Florida 33702  
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.*

Sharee Lyn Mandel  
If Changing Registered Agent, Signature of New Registered Agent

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

[illegible]

[illegible]

(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)

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.

Shanee Lyn Mandel

Signature of a member or authorized representative of a member

Sharee Lyn Mandel

Typed or printed name of signee