## L1900 135 845

(Re	equestor's Name)	
(Ac	ddress)	<del></del>
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name)	
(Document Number)		
Certified Copies	_ Certificates of Statu	s
Special Instructions to	Filing Officer;	
<u></u>		

Office Use Only



300335824763

10/17/19--01008--008 ++25.00

SECRETARY OF STATE TALLMIASSEE, FLORIDA

Y SULKER NOV 05 2019

## **COVER LETTER**

TO: Registration So Division of Co			
Tax Dox L			
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Paul J. Gilroy		
		Name of Person	<del></del>
	Tax Dox L.L.C.		
		Firm/Company	
	491 Partridge Circle		
	Sarasota, Florida 34236	Address	
	pgilroy@taxdox.com	City/State and Zip Code	
	E-mail address: (	to be used for future annual report notifi	eation)
For further information o	concerning this matter, please ca	all:	
Paul Gilroy		941 539-2017	
Name o	of Person	Arca Code Daytime	Telephone Number
Enclosed is a check for t	he 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:

TO:

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

Tax Dox L.L.C. (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 May 20, 2019 and assigned Florida document number L19000135845 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: TaxDox L.L.C. The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 rame registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Cuv

## 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>	Address	Type of Action
			Add
			Remove
			☐ Change
		Remove	
		<del></del>	□ Change
		<del></del> -	Add
		<del> </del>	□ Remove
			☐ Change
			Add
	<del></del>	□ Remove	
			☐ Change
		<del></del>	
			□ Remove
			□ Change
			□ Add
		<del></del>	Remove
			□ Change

	TaxDox L.L.C.
-	We would also like to add our EIN as follows: 84-2755773 (See attached documentation from the IRS)
•	
-	
-	
-	
_	
-	
-	
-	
-	
_	
-	
•	
-	
_	
lf an efi <u>Note:</u>	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	10/45/2019  Jauly Lall 19  Signature of a member or authorized representative of a member
	Paul J. Gilroy

Page 3 of 3

Filing Fee: \$25.00