

17C0000023982

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

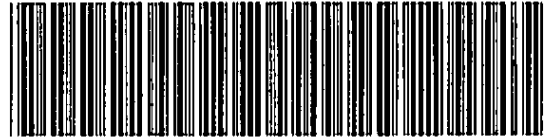
(Business Entity Name)

(Document Number)

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05/10/22--01010--001 \*\*25.00

SECRETARY OF STATE  
TALLAHASSEE, FL

2022 JUL 20 PM 4:18

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** arudolph 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:

Anthony J Rudolph

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

2848 Hope St

\_\_\_\_\_  
Address

Sarasota, FL 34231

\_\_\_\_\_  
City/State and Zip Code

antrudolph@hotmail.com

\_\_\_\_\_  
E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Anthony J Rudolph

702

286-5251

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 &  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 11, 2022

ANTHONY J RUDOLPH  
2848 HOPE ST  
SARASOTA, FL 34231

SUBJECT: ANTHONY JULIUS RUDOLPH PLLC  
Ref. Number: W22000090973

We have received your document for ANTHONY JULIUS RUDOLPH PLLC 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) 245-6052.

Neysa Culligan  
Regulatory Specialist III

Letter Number: 922A00015400

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

**FILED**

**2022 JUL 20 PM 4:18**

**SECRETARY OF STATE  
TALLAHASSEE, FL**

ARUDOLPH 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 01/16/2020 and assigned  
Florida document number L20000023982

This amendment is submitted to amend the following:

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

Anthony Julius Rudolph PLLC

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)

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

FOR THE BUSINESS OF Real Estate.

FILED

2022 JUL 20 PM 4:18  
SECRETARY OF STATE  
TALLAHASSEE, FL

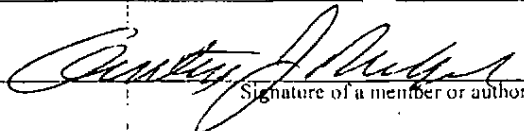
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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 1st 2022

 5/1/2022  
Signature of a member or authorized representative of a member

Anthony J Rudolph

Typed or printed name of signee