

L20000329135

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Amend

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
20 NOV -5 PM 12:30

NOV 05 2020

D CUSHING

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SOUTHERN LITIGATION SUPPORT SERVICES LLC

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:

Matthew G. Breuer

Name of Person

Driver, McAfee, Hawthorne & Diebenow PLLC

Firm/Company

One Independent Drive, Suite 1200

Address

Jacksonville, FL 32202

City/State and Zip Code

MBreuer@drivermcafee.com

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

For further information concerning this matter, please call:

Matthew G. Breuer

904

807-0186

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

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS
20 NOV - 5 PM 12:30

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

SOUTHERN LITIGATION SUPPORT SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

RECEIVED
STATE
CLERK OF COURT
SECTION OF COURT
20 NOV - 5 PM 12:38

The Articles of Organization for this Limited Liability Company were filed on 10/16/2020 and assigned
Florida document number L20000329135.

This amendment is submitted to amend the following:

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

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:

One Independent Drive, Suite 1200

(Principal office address MUST BE A STREET ADDRESS)

Jacksonville, Florida 32202

Enter new mailing address, if applicable:

One Independent Drive, Suite 1200

(Mailing address MAY BE A POST OFFICE BOX)

Jacksonville, Florida 32202

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:

Contega Business Services, LLC

New Registered Office Address:

One Independent Drive, Suite 1200

Enter Florida street address

Jacksonville


City

Florida 32202

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.

 , Executive V.P.

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>
AMBR	Beeckler, Thomas	7901 4th St N, Ste 300	<input type="checkbox"/> Add
		St. Petersburg, Florida 33702	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Breuer, Matthew G.	One Independent Drive, Suite 1200	<input checked="" type="checkbox"/> Add
		Jacksonville, Florida 32202	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

[illegible]

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 November 4 2020

Signature of a member or authorized representative of a member

Matthew G. Breuer

Typed or printed name of signee

Filing Fee: \$25.00