

L22 000 531 499

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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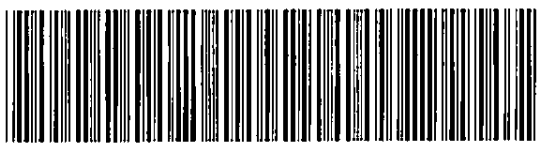
(Business Entity Name)

(Document Number)

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CLERK OF COURT
JANET M. SCOTT, FI

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JURI/ACCOUNTING, 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:

RICHARD BENDER

Name of Person

JURI ACCOUNTING, LLC

Firm/Company

6709 ODoniel Loop W

Address

Lakeland, FL 33809

City/State and Zip Code

RICHARD@BENDERACCOUNTING.COM

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

For further information concerning this matter, please call:

RICHARD BENDER

863 206-7156

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

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

JURI ACCOUNTING, 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 12/20/2022 and assigned
Florida document number 1.22000531499

This amendment is submitted to amend the following:

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

BENDER PUBLIC ACCOUNTING, 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)

6709 ODONIEL LOOP W

LAKELAND, FL 33809

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

Case	Initial	Final	Change
1	10	20	10
2	20	30	10
3	30	40	10
4	40	50	10
5	50	60	10
6	60	70	10
7	70	80	10
8	80	90	10
9	90	100	10
10	100	110	10
11	110	120	10
12	120	130	10
13	130	140	10
14	140	150	10
15	150	160	10
16	160	170	10
17	170	180	10
18	180	190	10
19	190	200	10
20	200	210	10
21	210	220	10
22	220	230	10
23	230	240	10
24	240	250	10
25	250	260	10
26	260	270	10
27	270	280	10
28	280	290	10
29	290	300	10
30	300	310	10
31	310	320	10
32	320	330	10
33	330	340	10
34	340	350	10
35	350	360	10
36	360	370	10
37	370	380	10
38	380	390	10
39	390	400	10
40	400	410	10
41	410	420	10
42	420	430	10
43	430	440	10
44	440	450	10
45	450	460	10
46	460	470	10
47	470	480	10
48	480	490	10
49	490	500	10
50	500	510	10
51	510	520	10
52	520	530	10
53	530	540	10
54	540	550	10
55	550	560	10
56	560	570	10
57	570	580	10
58	580	590	10
59	590	600	10
60	600	610	10
61	610	620	10
62	620	630	10
63	630	640	10
64	640	650	10
65	650	660	10
66	660	670	10
67	670	680	10
68	680	690	10
69	690	700	10
70	700	710	10
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73	730	740	10
74	740	750	10
75	750	760	10
76	760	770	10
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78	780	790	10
79	790	800	10
80	800	810	10
81	810	820	10
82	820	830	10
83	830	840	10
84	840	850	10
85	850	860	10
86	860	870	10
87	870	880	10
88	880	890	10
89	890	900	10
90	900	910	10
91	910	920	10
92	920	930	10
93	930	940	10
94	940	950	10
95	950	960	10
96	960	970	10
97	970	980	10
98	980	990	10
99	990	1000	10
100			

CHANGING NAME BACK TO CORRECT NAME FOR IRS

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.

Dated February 5th 2024

Signature of a member

Signature of a member or authorized representative of a member

Richard L Bender III

Typed or printed name of signee

Filing Fee: \$25.00