(Re	questor's Name)	
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JUL 11 2008

EXAMINER



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07/10/08--01012--002 **25.00

COVER LETTER

Division of Corporations SUBJECT: SPRAKER, FITZGERALD, TAMAYO & MOISAND, 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: Ronald Tamayo, CFP (Name of Person) Moisand Fitzgerald Tamayo LLC (Firm/Company) 601 S. Lake Destiny Road, Suite 165 (Address) Maitland, Florida 32751 (City/State and Zip Code) For further information concerning this matter, please call: at (407) 869-6228 Ronald Tamayo (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for the following amount:

□\$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

□\$30.00 Filing Fee &

Certificate of Status

☑ \$25.00 Filing Fee

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

□\$60.00 Filing Fee,

Certified Copy

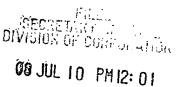
Certificate of Status &

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

SPRAKER, FITZGERALD, TAMAYO & MOISAND, LLC



OF STORY

(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on ca Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Florida document number L98000001287	Company were filed on July 31, 1	998 and assigned
Tiorida document ramber (1990)	 •	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lir	mited liability company here:	
MOISAND FITZGERALD TAMAYO LLC		
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," t	he designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	491-491-491-491-491-491-491-491-491-491-
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
•		
B. If amending the registered agent and/or registered agent and/or the new registered office ad		ecords, <u>enter the name of the new</u>
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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member Type of Action Title Address Name MGRM SUSAN S SPRAKER 161 WHITE OAK CIRCLE **⊞** Add Remove MAITLAND, FLORIDA 32751 **□** Add ☐ Remove 🗂 Add ☐ Remove ☐ Add Remove ☐ Add 🗖 Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) PLEASE MAKE THE ABOVE CHANGES EFFECTIVE JULY 21, 2008. Dated JULY 7 2008 Signature of a member or authorized representative of a member

Typed or printed name of signee
Page 2 of 2

RONALD TAMAYO

Filing Fee: \$25.00