

L99000001158

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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2017 FEB 17 PM 2:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
FEB 21 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 8, 2017

MASSEY, COICAN & KING, L.L.C.  
ALBERT P. MASSEY III  
707 SE 3RD AVE, STE. 200  
FORT LAUDERDALE, FL 33316

SUBJECT: MASSEY, COICAN & KING, L.L.C.  
Ref. Number: L99000001158

We have received your document for MASSEY, COICAN & KING, L.L.C. and your check(s) totaling \$60.00. 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) 245-6051.

Karen A Saly  
Regulatory Specialist II

Letter Number: 917A00002539

2017 FEB 17 PM 2:23  
RECEIVED  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Massey, Coican & King, L.L.C.  
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:

Albert P. Massey III

Name of Person

Massey, Coican & King, L.L.C.

Firm/Company

707 S.E. 3rd Avenue, Suite 200

Address

Fort Lauderdale, FL 33316

City/State and Zip Code

eileen@masseylaw.com

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

For further information concerning this matter, please call:

Albert P. Massey III

Name of Person

at (954)

Area Code

527-3919

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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Massey Coican & King, LLC.

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 1/28/99 and assigned  
Florida document number L99000001158.

This amendment is submitted to amend the following:

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

Massey, Coican & King, P.L.L.C.

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)

707 S.E. 3rd Avenue

Suite 200

Fort Lauderdale, FL 33316

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME

**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>
MGR	Albert P. Massey III	707 SE 3rd Avenue	<input type="checkbox"/> Add
		Suite 200	<input type="checkbox"/> Remove
		Fort Lauderdale, FL 33316	<input checked="" type="checkbox"/> Change
	Gregory G. Coican		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
	Eileen Y. Narvaez		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

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

Purpose of the entity: To render professional legal services to clients.

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TALLAHASSEE, FLORIDA

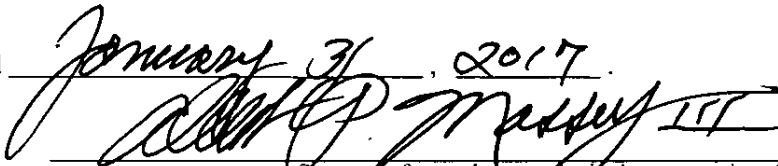
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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

January 31, 2017  


Signature of a member or authorized representative of a member

Albert P. Massey, III

Typed or printed name of signee