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COVER LETTER

TO: Registration Sec Division of Corp	tion orations		
SUBJECT: FROST	TAMAYO SESSUMS & AR	ANDA, L.L.C.	
	(Name of Lim	ited Liability Company)	
The enclosed Articles of A	mendment and fec(s) are sub	omitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	John W. Frost,		
		(Name of Person)	
	Frost Sessums	van den Boom & Smith, P. (Firm/Company)	
	Post Office Bo		OB JAH 11 AH 11: 05 SECRETARISEE FLORIS
		(Address)	
	Bartow, FL 33	831-2188	
		(City/State and Zip Code)	
For further information cor	ncerning this matter, please c	all:	OPPER OS
John W. Fr	cost, II	at (863) 533-0314	
(Name of	Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for the	following amount:		·
X \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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 ARTICLES OF ORGANIZATION **OF**

(Name of the Limited)	SESSUMS & ARANDA, L.L. Liability Company as it now appe	ars on our records.)		
(A	Liability Company as it now appe Florida Limited Liability Company)		
The Articles of Organization for this Limited Lia	ability Company were filed on	6/18/99	and assigned	
Florida document number <u>L99000003608</u>	·			
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liability company h	ere:		
	UMS van den BOOM & SMI'			
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Com	pany," the designation "LI	LC" or the abbresiation of the SECHE	n
B. If amending the registered agent and/or		our records, enter th	e name of the ne	<u>w</u>
registered agent and/or the new registered off	ice address here:			B
Name of New Registered Agent:	Same		AH II: 05 OF STATE E. FLORIDA	
	0			
New Registered Office Address:	Same (1	Enter Florida street addi	ress)	
	Bartow	, Florida _ 33	1830	
	(City)	 ,	(Zip Code)	

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.

N/A			
(If Changing I	Registered Agent, Signatu	re of New Registered	Agent)

`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 = M MGRM =	lanager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Add Remove
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D. If ame	nding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
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Dated	January 7 , 2006	nh >	
	John W. Frost,		
	Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00

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