

LO2000011122

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

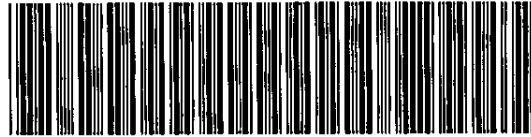
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D. BRUCE  
NOV 09 2016



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 2, 2016

NYDIA MENEDEZ  
450 N. PARK ROAD, STE 801  
HOLLYWOOD, FL 33021

SUBJECT: THE LAW OFFICE OF NYDIA MENEDEZ, LLC  
Ref. Number: L02000011122

We have received your document for THE LAW OFFICE OF NYDIA MENEDEZ, LLC and your check(s) totaling \$25.00. 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.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 116A00023502

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TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: The Law Office of Nydia Menendez, 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:

Nydia Menendez, Esq.  
Name of Person

The Law Office of Nydia Menendez, LLC, dba, Menendez Law Firm  
Firm/Company

2699 Stirling Road, B200  
Address

Fort Lauderdale, FL 33021  
City/State and Zip Code

nydia@menendezlawfirm.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nydia Menendez, Esq. at ( 954 ) 963-7220  
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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

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

The Law Office of Nydia Menendez, 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 05/08/2002 and assigned Florida document number L02000011122.

This amendment is submitted to amend the following:

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

Menendez Law Firm, PLLC

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:**

2699 Stirling Road, B200

**(Principal office address MUST BE A STREET ADDRESS)**

-Fort Lauderdale, FL 33312

**Enter new mailing address, if applicable:**

2699 Stirling Road, B200

**(Mailing address MAY BE A POST OFFICE BOX)**

-Fort Lauderdale, FL 33312

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**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:**

Menendez Law Firm

**New Registered Office Address:**

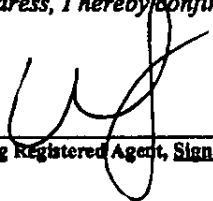
2699 Stirling Road, B200

Enter Florida street address

Fort Lauderdale, Florida 33312  
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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

The specific purpose of this entity is to provide legal services.

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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 9/ 2016 .

\_\_\_\_\_  
Signature of a member or authorized representative of a member  
*Neyden Menéndez*  
\_\_\_\_\_  
Typed or printed name of signer