3/25/24, 3:38 PM

Division of Corporations



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Tq:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : I22030000067 Phone : (845)425-0077 Fax Number : (845)818-3588

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GARCIA SANTA MARIA, PLLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GARCIA SANTA MARIA. PLLC

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

(A Florida Limited Liability Company)

The Articles of Organization for this Lumited Liability Company were filed on January 4, 2022 and assigned Florida document number 1.22000005644

This amendment is submitted to amend the following:

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

Garcia Santa Maria De Armas Trujille PLLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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 Edistered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Figur Flancia street address

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.

To: FL DIVISION OF CORPORATIONS Page: 3 of 4 2024-03-25 19 40.09 GMT 18886118813 From: Vcorp Services, LLC

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>	Name	Address	Type of Action
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