M19000004970

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO:	Registration Section Division of Corporations		-	ŧ
SUBJ	Method Architecture, PLLC			
50.00		reign Limited L	iability Co	mpany
Dear	Sir or Madam:			
The e	nclosed application, certificate and fe	e(s) are submitte	ed for filing	g.
Please	e return all correspondence concerning	g this matter to t	the followi	ng:
Nancy	y Donaldson			4.
	Name of Person			2021
Metho	od Architecture			
	Firm/Company		·	2° 7
2118	Lamar St., Suite 200			TILED MINUS-2 PH 2:35 STATEMENT OF STATE
	Address			7 33 35 S
Houst	on, TX 77003			
	City/State and Zip (Code		
	censes@methodarchitecture.com			
E-r	mail address: (to be used for future and	nual report notif	fication)	
For fi	arther information concerning this ma	tter, please call:		
Nancy	y Donaldson	at (244-4	250
	Name of Person	Area Co	ode & Day	time Telephone Number
	Mailing Address:		Street A	Address:
	Registration Section		_	ration Section
	Division of Corporations		Divisio	on of Corporations
	P.O. Box 6327		The Ce	entre of Tallahassee
	Tallahassee, FL 32314		2415 N	N. Monroe Street, Suite 810
			Tallaha	assee, FL 32303
	Enclosed is a check for the follow	_		
\$ \$2:	5 Filing Fee	□ \$55 Fili	-	□ \$60 Filing Fee,
	Certificate of Stati	us Certifie	d Copy	Certificate of Status & Certified Conv

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

Enter new principal office address, if applicable	le:				
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)					
2. The Florida document number of this limited	d liability company is: M1900000	4970			
3. Jurisdiction of its organization: Texas		7 P 3			
4. Date authorized to do business in Florida:	May 20, 2019	5.5 5.7 5.7 5.7 5.7 5.7 5.7 5.7 5.7 5.7			
SECTION II (5-9 complete only the application)	ble changes)	(r)			
5. New name of the limited liability company: (r	Method Architecture, LLC must contain "Limited Liability Co	ompany, " "L.L.C.," or "LLC.")			
(If name unavailable, enter alternate name ador copy of the written consent of the managers or must contain "Limited Liability Company," "L	managing members adopting the	business in Florida and attach a alternate name. The alternate name			
6. If amending the registered agent and/or registered agent and/or the new registered office		ds, enter the name of the new			
Name of New Registered Agent:					
New Registered Office Address:	F., Fl	J. Comment Address			
	Enter Florida Street Address				
	City	, Florida Zip Code			
		•			

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:						
itle/ Capacity	Name	Address	Type of Action			
			□Add			
			□Remov			
			□Remo			
			1021 NUG 12			
			PH No Remov			
			=====================================			
			□Remo			
			□Add			
. Attached is a certif	icate, if required: no more than 90	days old, evidencing the	□Remo			
aforementioned am	nendment(s), duly authenticated by the law of which this entity is organ	the official having custody of reconized.	rds in the			
	Marcy Orrold Signature of t	he authorized representative				

Filing Foot \$25.00



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that on May 05, 2021, Method Architecture, PLLC, a Domestic Limited Liability Company (LLC) (file number 802420393), changed its name to Method Architecture, LLC.

In testimony whereof, I have hereunto signed by name officially and caused to be impressed hereon be Seating State at my office in Austin, Texas on May 24, 2021



Ruth R. Hughs Secretary of State