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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Adminis	strative Research Associate	es, Inc.		
DOCUMENT NUM					
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	Jamie Sevor				
		Name of Contact Perso	n		
	Judicial & Administrative Research Associates, Inc.				
	Firm/ Company				
	1327 N. Adams Street				
		Address			
	Tallahassee, FL 32303				
		City/ State and Zip Cod	c c		
	staff@FloridaLawWeekly.com	าา			
	E-mail address: (to be us	ed for future annual report	notification)		
For further informatio	on concerning this matter, pleas	se call: at (at (222-3171		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	or the following amount made p	payable to the Florida Dep	artment of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Am Div P.O	iling Address tendment Section distance of Corporations Box 6327 lahassee, F1, 32314	Ameno Divisio The C 2415 i	Address Innent Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303		

FILED

Articles of Amendment to Articles of Incorporation of

2021 OCT 25 AM 10: 23

Judicial & Administrative Research Associates, Inc.

SECRITARY OF STATE

(Name of Corporation	n as currently filed with the Florida Dept. of State)	9E.F. F ₁ (5)4 3
(Docume	ent Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following a	mendment(s) to
A. If amending name, enter the new name of the cor	rporation <u>:</u>	
	T)	he new
	rporation," "company," or "incorporated" or the abbreviation ' or "Co". A professional corporation name must contain to viation "P.A"	
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDI</u>		
	-	
		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
		
D. If amending the registered agent and/or registere	ed office address in Florida, enter the name of the	
new registered agent and/or the new registered o		
Name of New Registered Agent		
	(Florida street address)	
	nonu metaurem	
New Registered Office Address:	, Florida	
	(Zip Coa	17)
New Registered Agent's Signature, if changing Regis	stared Agent	
Thereby accept the appointment as registered agent. 1	am familiar with and accept the obligations of the position.	
Signat	ture of New Registered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s, 607,0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u> <u>John</u>	Doc	
X Remove	V <u>Mik</u> s	e Jones	
X Add	<u>SV</u> <u>Sally</u>	· Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Everett H. Young	323 Buttonwood Lane
Add X Remove			Tallahassee, FL 32317
21 X Change	CFOSD'	Jamie Sevor	3424 Cedarwood Trail
Add			Tallahassee, FL 32312
Remove	COOD	Matthew Crumbaker	8544 Hannary Circle Tallahassee, F£ 32312
Remove 4) Change X Add	1)	Dominick Ryals	416 Beard Street Tallahassee, FL 32303
Remove 5) Change X Add	<u>D</u>	Robert Fink	7126 Shady Grove Way Tallahassee, FL 32312
Remove 6) Change Add Remove			

f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate NA)	Attach <i>add</i>	g or adding additional Articles, ent tional sheets, if necessary).— (Be sp	ecific)			
provisions for implementing the amendment if not contained in the amendment itself:						
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(if not applicable, indicate N/A)	an amen	dment provides for an exchange, re-	classification, or	cancellation of iss	ued shares,	
	(if not	applicable, indicate N/A)	W HON CONTAINED I	an the antendment	Itacii.	
		··		-		
				-		

The date of each amendment		, if other than the
date this document was signed Effective date if applicable:	10/20/2021	
	(no more than 90 days after amendment file date)	.
	this block does not meet the applicable statutory filing requirements, this he Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer action was not required.	re adopted by the incorporators, or board of directors without shareholder a	action and shareholder
☐ The amendment(s) was/wer by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendme ere sufficient for approval.	ent(s)
	re approved by the shareholders through voting groups. The following stated for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
board of director:		
	(voting group)	
10/20 Dated	72021 	
se	y a director, president or other officer – if directors or officers have not be deeted, by an incorporator – if in the hands of a receiver, trustee, or other expointed fiduciary by that fiduciary)	
	Jamie Sevor	
	(Typed or printed name of person signing)	
	CFO, Secretary, Director, Treasurer	
	(Title of person signing)	