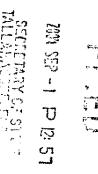
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**			
	(Requestor	s Name)	
((Address)		
	(Address)		<u>,</u>
	(City/State/	Zip/Phone :	#
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	(Business E	Entity Name	e)
	(Document	Number)	
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TRANSMITTAL LETTER

TO: Registration Division of	n Section Corporations						
SUBJECT:			DUNSEL,	LLC		_	
	(Name of Lin	nited Liability	(Company)				
The enclosed Article	s of Amendment and fee(s) are sub	mitted for fili	ng.				
Please return all corr	espondence concerning this matter	to the follow:	ing:				
		Γ P. ROS					
	(Ne	ame of Person)				
	ROSETTO CLO	OSING SI irm/Company)	ERVICES	, LLC		-	
	1384 THATC	(Address)			TALLAHA	1700N SEP	
-	BOCA RATO) (City/S	tate and Zip C	ode)	<u>. </u>	THE J		a a
For further informati	on concerning this matter, please ca				2.267 1.267	5 십 더	2
	BRUCE C. ROSETTO	at (561	417-			
	(Name of Person)		(Area Code &	k Daytime '	Felephone Nur	nber)	
Enclosed is a check for	the following amount:						
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status		filing Fee & ded Copy on all copy is end	closed)	S60.00 Fi Certificate of Certified Cop (additional c	Status &	
	REET ADDRESS:		MAILING Paristratio		SS:		

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

-		CORPORATE COUNSEL, LLC (Present Name) (A Florida Limited Liability Company)	
FIRST:		es of Organization were filed on <u>SEPTEMBER 6, 2001</u> number <u>L01000015</u> 441	and assigned
SECOND:	The follo	owing amendment(s) to the Articles of Organization mpany:	was/were adopted by the limited
TH AF TH IS:	RTICLE II: E MAILING A 1384 THATCH RTICLE III:	NAME HE LIMITED LIABILITY COMPANY IS ROSETTO CLOSING SERV ADDRESS DDRESS AND STREET ADDRESS OF THE PRINCIPAL OFFICE OF I PALM DRIVE, BOCA RATON, FLORIDA 33432 REGISTERED AGENT FLORIDA STREET ADDRESS OF THE REGISTERED AGENT IS:	THE LIMITED LIABILITY COMPANY
	TICLE IV: E LIMITED LL AUGU	MANAGEMENT ABILITY COMPANY SHALL BE MANAGED BY ITS MEMBER, RO ST Signature of a member or authorized representative of Typed or printed name of signee	DBERT P. ROSETTO

Filing Fee: \$25.00