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| | Registration Se Division of Cor | | | | | | |
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| eun ie c | | ales Sockel-Stone, LLC | | | | | |
| SUBJEC | .1: | Name of Limited Liability Company | | | | | |
| The encle | osed Articles of | Amendment and fee(s) are sub- | mitted for filing. | | | | |
| Please re | turn all correspo | ndence concerning this matter | to the following: | | | | |
| | | Carol Henderson | | | | | |
| | | | Name of Person | | | | |
| Foster-Morales PLLC Firm/Company | | | | | | | |
| | | | Firm/Company | | | | |
| 150 West Flagler Street. Penthouse II # 2950 | | | | | | | |
| | | | Address | | | | |
| | | Miami, Fl. 33130 | | | | | |
| | | | City/State and Zip Code | | | | |
| | | carol@fostermorales.com | | | | | |
| | | E-mail address: (| to be used for future annual report notif | ication) | | | |
| For furth | er information c | oncerning this matter, please ca | all: | | | | |
| Carol Ho | enderson | | 786 621-9847 | | | | |
| | Name o | f Person | Area Code Daytime | e Telephone Number | | | |
| Enclosed | is a check for th | ne following amount: | | | | | |
| ■ \$2 5. | 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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee



October 12, 2021

CAROL HENDERSON 150 WEST FLAGLER STREET PENTHOUSE II #2950 MIAMI, FL 33130

SUBJECT: FOSTER-MORALES SOCKEL-STONE, LLC

Ref. Number: L01000022763

We have received your document for FOSTER-MORALES SOCKEL-STONE, 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) 245-6050.

Letter Number: 021A00024814

Irene Albritton Regulatory Specialist III

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Taylor II Allor 26

Foster-Morales Sockel-Stone, LLC

company has been notified in writing of this change.

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

| ere filed on 9/9/2011 and assigned |
|---|
| |
| ty company here: |
| |
| Company," the designation "LLC" or the abbreviation "L.L.C." |
| Foster-Morales PLLC |
| 150 West Flagler Street PH II # 2950 |
| Miami, Fl. 33130 |
| |
| Foster-Morales PLLC |
| 150 West Flagler Street PH II # 2950 |
| Miami, Fl. 33130 |
| |
| dress on our records, <u>enter the name of the new register</u> |
| |
| |
| |
| Enter Florida street address |
| |
| Enter Florida street address , Florida City Zip Code |
| |

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 = M AMBR = A | Ianager Authorized Member | | |
|---------------------|------------------------------|---------|----------------|
| <u>Title</u> | Name | Address | Type of Action |
| | | | □Add |
| | | - | □Remove |
| | | | ☐ Change |
| | | | □Add |
| | | | □ Remove |
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_ 🗆 Remove

| | practice family law Dori Foster-Morales is attorney Florida bar # 849332 |
|--|---|
| This is why we need the | e PLLC |
| Please call me at 786-2 | 298-7215 for any questions or if you see I am missing any information |
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| Iffective date, if other than the an effective date is listed, the date must be a listed. If the date inserted in this blocument's effective date on the D | e date of filing: |
| record specifies a delayed effectiv d is filed. | re date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the |
| September 24 | 2021 |
| | |
| | Signature of a member or authorized representative of a member |