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D. SCOTT

FAX

To:	18502456030
Fax No:	18502456030
From:	chris
Contact No:	8503619592
Date:	03-31-2017 9:29 AM CT
Subject:	
No. of Pages (with cover):	7

To: Division of Corporations Attn: Ms. Dionne Scott

From: Christopher R. Johnson

Third Coast Law Group, LLP Christopher R. Johnson, Esq. 7 North Coyle Street Pensacola, FL 32502 850-433-8529 office 1-800-237-1468 facsimile crjohnsonlaw@yahoo.com

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SUBJECT: This	rd Coast L	ed Liability Company	CC
The enclosed Articles of A	Amendment and fee(s) are subn	nitted for filing.	•
Please return all correspon	ndence concerning this matter t	o the following:	
	Cheistop	Nex R. Johns	ron
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		Firm/Company	rayerin Adar Samina distribution and purchase and assessment
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		Address	
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	Crick NSOW of E-mail address (the Cyahoo come obe used for future annual report notific	cation) .
For further information c	oncerning this matter, please ca	11:	
Chaistophen Hame o	P. Johnson		3-8529 Telephone Number
		•	•
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\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & T

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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company has been notified in writing of this change.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Third Const LAW	GROUP, LLC
(Name of the Limited Liability Compan (A Florida Limited L	y as it now appears on our records.) (ability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>LO30000347</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
Trividad LAW GRO	OP, PLLC
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Na
(Principal office address MUST BE A STREET ADDRESS)	1 2 2
	j .
Enter new mailing address, if applicable:	w/A
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
	1 MS 2
Name of New Registered Agent:	WA SECTION
New Registered Office Address:	
	Enter Florida street address
	Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

MGR - Manager

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = A	uthorized Member		
<u> </u>	<u>Name</u>	Address	Type of Action
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D. If an	ending any other information, enter change(s) here: (Anach additional sheets, if necessary,	<i></i>
	The entity is a law Firm. Therefore	we
	cere chance the designation to PLLC	as
	opposed to LLC.	
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E. Effec	tive date, if other than the date of filing:(optional)	長村子
Note	ffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date venent's effective date on the Department of State's records.	Pursuant to 605.0207 (3)(b) vill not be listed as the
If the re (b) Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. of e 90th day after the record is filed.	n the earlier of:
Date	1_3/14/17	
	i CM	
	Signature of a member or authorized representative of a member	
	Chais for his S. Johnson Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00