L06000094035

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200316142642

U7/38/16--81.21--811 **25.1

TALLAHASSEE FLORIDA

2011 JUL 30 AM 8: 2

JM5-4-18

COVER LETTER

Division of Cor	ction porations			
Kenneth Bo	bhannon PL			
JOBSTICE	Name of Lim	ited Liability Company		
The analoged Articles of	Amendment and fee(s) are sub-	mitted for filing		
	ndence concerning this matter			
rtease return an correspo	indence concerning this matter	to the tonowing.		
	Kenneth Bohannon			
		Name of Person		
	Kenneth Bohannon PL			
	Firm/Company			
	221 N. Causeway, Suite A Address			
	New Smyrna Beach, FL 33	2169		
	City/State and Zip Code			
	kbohannon@cfllawyer.com	to be used for future annual report notif	ication)	
Can Comb on in Communication of		•	(Canon)	
ror turner information c	oncerning this matter, please ca	dti.		
Kenneth Bohannon		386 427-5227 at ()		
Name c	f Person	Area Code Daytime	: Telephone Number	
Enclosed is a check for t	he following amount:			
\$25,00 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 tadditional copy is enclosed.	

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kenneth Bohannon, P.L. (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{09/26/2006}{1}$ and assigned Florida document number L06000094035 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Coronado Law Group, PLLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 221 N. Causeway, Suite A Enter new principal offices address, if applicable: New Smyma Beach, FL 32169 (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Ent the new B. If amending the registered agent and/or registered office address on our records, enter the name registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□ Remove
			Change
			Add
			□ Remove
			Change
	<u></u> ,		D Add
			Remove
			Change
			Change Old JUL 30 ve AM 8 2 2 3
			—————————————————————————————————————
			□ Remove
			☐ Change
			□ Remove
			□ Changu

	T. C.
	PAR UL VI
	20 C
(lf an e <u>Note:</u>	tive date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	1 Joly 24 . 2018.
	Signature of a member or authorized representative of a member
	Kunns Ha Baltuman Typed or printed name of signee
	Typed or printed name of stance

Page 3 of 3

Filing Fee: \$25.00