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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Bates N	/lokwa, PLLC			Ð
		nited Liability Company)		
	Amendment and fee(s) are sub	•		
	Aaron Bates			
	Bates Mokwa, PLLC			
		(Firm/Company)		
	126 East Jefferson Stree	et		•
		(Address)	Z000 TALLL	
	Orlando, FL 32801		ONE T	
		(City/State and Zip Code)	ARY SSE	
For further information c	oncerning this matter, please c	call:	P III	
Rachel Farber		at (407) 893-3776		
(Name o	of Person)	(Area Code & Daytime T	elephone Number)	
Enclosed is a check for the	ne 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 (additional copy is enc	
Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327 ussee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bates Mokwa, PLLC (Name of the Limited (A	Liability Compa Florida Limited I	ny as it now appears on ou Liability Company)	<u>ır records.</u>)		
The Articles of Organization for this Limited Liability Company were filed on June 19, 2007					
Florida document number L07000064315	·			•	
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name o	f the limited liab	oility company here:			
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ited Liability Company," the	e designation	"LLC" or the abbreviation	
Enter new principal offices address, if applic	able:	126 East Jefferson Str	eet 🔁		
(Principal office address MUST BE A STREE	ET ADDRESS)	Orlando, FL 32801			
	·				
				22	
Enter new mailing address, if applicable:		126 East Jefferson Str	eet 🖺 🚊 .	7	
(Mailing address MAY BE A POST OFFICE BOX)		Orlando, FL 32801			
			man care	<u> </u>	
B. If amending the registered agent and/registered agent and/or the new registered of Name of New Registered Agent: New Registered Office Address:		e: erson Street	cords, enter		
	Orlando	(2			
	Onanuo	(City)	_, Florida S	(Zip Code)	
		• • • • • • • • • • • • • • • • • • • •			

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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma MGRM = N	nager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
		AH SET	Add Add Remove
		F. F. ORUZ	Add Add
			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary).)
<u></u>			
Dated <u>Augus</u>			
		r or authorized representative of a member	
	Aaron C. Bates, Membe	or printed name of signee	

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Filing Fee: \$25.00