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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Burruezo & Burruezo, PLLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carlos J. Burruezo, Esq.

Name of Person

Burruezo & Burruezo, PLLC

Firm/Company

941 Lake Baldwin, Suite 102

Address

Orlando, Florida 32814

City/State and Zip Code

carlos@burruezolaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carlos J. Burruezo, Esq.

_{...}407、754-2904

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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

Burruezo & Burruezo, PLLC					
(Name of the Limited	Liability Compan Florida Limited L	y as it now appears on our records.) iability Company)			
The Articles of Organization for this Limited Liab Florida document number L0700064459 This amendment is submitted to amend the follow A. If amending name, enter the new name of the submitted to a sub	bility Company v	were filed on June 15, 2007	an	d assign	ed
		_			
The new name must be distinguishable and end with the wo	ords "Limited Liabi	lity Company," the designation "LLC" of	r the abbreviat	ion "L.L.	C."
Enter new principal offices address, if applicable:		941 Lake Baldwin Lane, Suite 102			
(Principal office address MUST BE A STREET ADDRESS)		Orlando, Florida 32814			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		941 Lake Baldwin Lane, S Orlando, Florida 32814	Suite 102		
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent: New Registered Office Address:	ce address here		nter the na	ame of	the new
	Orlando	. Florid	a 32814		**************************************
		City	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 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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

<u>Title</u>	Name	Address	Type of Actio
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). If amending any other informatio	n, enter change(s) here: (Attach additional sheets, if necessary.)
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<u> </u>	
	
E. Effective date, if other than the da (The effective date must be specific, cannot be the date this document is filed by the Florid	the of filing:
Dated August 15	2014
Jane Jane	- An
Sig	gnature of a member or authorized representative of a member
Carlos J. Burru	•
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00