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COYER LETTER

Division of Corporations
SUBJECT: The Association Law Firm, LLC (Name of Limited Liability Company)
(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:
Paul De Hart (Name of Person)
The Association Law Firm (Firm/Company)
6236 Kingspointe Pkwy Suite 9
(**************************************
Orlando, FL 32819 (City/State and Zip Code)
For further information concerning this matter, please call:
Taul DeHart at (407) 992-8812 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{Certified Copy} \text{(additional copy is enclosed)} \text{\$\text{Certified Copy} \text{(additional copy is enclosed)}} \text{\$\text{Certified Copy} \text{(additional copy is enclosed)}} \text{\$\text{Certified Copy} \text{(additional copy is enclosed)}} \text{\$\text{\$\text{Certified Copy} \text{(additional copy is enclosed)}} \text{\$\text{\$\text{Certified Copy} \text{(additional copy is enclosed)}} \text{\$\text{\$\text{Certified Copy} \text{(additional copy is enclosed)}} \text{\$\text{\$\text{\$\text{\$\text{certified Copy} \text{(additional copy is enclosed)}}} \$\text{\$\tex
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314



July 7, 2008

PAUL DEHART 6236 KINGSPOINT PARKWAY SUITE 9 ORLANDO, FL 32819

SUBJECT: THE ASSOCIATION LAW FIRM, LLC

Ref. Number: L08000000494

We have received your document for THE ASSOCIATION LAW FIRM, 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) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 608A00038114

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION 08 JUL 28 AM 10: 32

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FILED

	AFLANASSEC LEGINDA
The Associ	ation Law Firm, LLC
(Name of the Limited Liab	ation Law Firm, LLC ility Company as it now appears on our records.) da Limited Liability Company)
(A Fior	da Limited Liaotity Company)
The Articles of Organization for this Limited Liabili	ty Company were filed on $\frac{1/2/2008}{}$ and assigned
Florida document number <u>L08 00 00 00 4</u>	(A) 1
Florida document number <u>Los octobos 4</u>	<u>19.</u> .
This amendment is submitted to amend the following	ğ:
A. If amending name, enter the new name of the	limited liability company here:
The Association	Law Firm PLLC
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicables	DORESSI Suite 9 Orlando FL 32819
(Principal office address MUST BE A STREET AL	DORESS) Suite 9
	Oclando F1 32819
Enter new mailing address, if applicable:	6236 Kingspointe Pkwy Suite 9 Orlando FL 32819
(Mailing address MAY BE A POST OFFICE BOX	Suite 9
	Orlando FL 32819
	gistered office address on our records, enter the name of the nev
registered agent and/or the new registered office a	iddress here:
Name of New Registered Agent:	
N. B. 14 100 All	1721 Vincenainte OVIII Suite G
New Registered Office Address:	(Enter Florida street address)
	(Enter Florida street address) Orlando, Florida 32819 (City) (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist	

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.

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

MGR = N MGRM =	Manager = Managing Member		
<u>Title</u> `	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			- D
			Add Remove
			AddRemove
_	The general purpose, as articles, sha ll be to legal services.	s stated in the origin	al
Dated	- Taul Defut	708. r or authorized representative of a member	FILED 18 JUL 28 AM ID: 32 18 SECRETION DE SIGNE S
	Paul DeHart	or printed name of signee	# 32

Page 2 of 2

Filing Fee: \$25.00