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EXAMINER

· COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Marks, F				
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.		
Please return all correspond	dence concerning this matter	to the following:		
	Darin Lentner		· 	
		(Name of Person)		
Marks, Fleischer, & Lentner, LLC				
		(Firm/Company)		
	303 SW 6th Street			
		(Address)		
	Fort Lauderdale, FL 3331	5		
(City/State and Zip Code)				
For further information co	ncerning this matter, please ca	all:		
Darin Lentner	at (954) 880-2560			
(Name of	Person)	(Area Code & Daytime T	elephone 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

Marks, Fleischer, Korte & Lentner, LLC (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 January 15, 2009 Florida document number L09000005051 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Marks, Fleischer & Lentner, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new 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 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.

(City)

(If Changing Registered Agent, Signature of New Registered Agent)

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 = Manager

MGRM = Managing Member

Title <u>Name</u> <u>Address</u> Type of Action MGR BRIAN K. KORTE, PL 2101 VISTA PARKWAY ■¶ Add WEST PALM BEACH, FL 33411 Remove Add Remove Remove 🔳 Add 🗂 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated April 13 Signature of a member or authorized representative of a member President Law Offices of Darin J. Lent Darin Lentner Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00