L09000030674

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12 MAY -2 AM 10: 50

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

14. Charleson MAY - 4 2012

`TO: , **Registration Section Division of Corporations** The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/Company For further information concerning this matter, please call: at (786) 500 - 590\. Area Code & Daytime Telephone Number Enclosed is a check for the following amount:

\$55.00 Filing Fee &

(additional copy is enclosed)

Certified Copy

MAILING ADDRESS:

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Certificate of Status

\$25.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

\$60.00 Filing Fee,

.Certified Copy

Certificate of Status &

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

12 MAY -2 AH 10: 50

You and Me Continually LLC ISLURETARY OF STATE.
(Name of the Limited Liability Company as it now appears on our records:) ASSEE, FLORIDA (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on 33/30/2009 and assigned
Plorida document number <u>LDQ000030674</u> .
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
Mills Metz Law LLC
he 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)
·
3. 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
, Florida
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 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 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 = Ma MGRM = 1	anager Managing Memb	er			
<u>Title</u>	Name		Address		Type of Action
					Add Remove
					☐ Add ☐ Remove
					☐ Add ☐ Remove
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					□Add □Remove
D. If amen	ding any other in	nformation, enter ch	hange(s) here: (Attach additional s	sheets, if necessary.) ALL AHASSE	FIL 12 MAY -2
_	1			E.FLORIDA	ANIO: 50
Dated	4 25	Anda	2012. Mu		
		, –	mber or authorized representative of a Hilm M, M yped or printed name of signee	n member	

Page 2 of 2

Filing Fee: \$25.00