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COVER LETTER -

Division of Corporations
SUBJECT: Law Offices of Trigia G. Zavenson, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
Mame of Person
Eavenson Law, LLC
6767 X. Wickham Road, Suite 400
Melbourne, FL 32940 City/State and Zip Code
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
For further information concerning this matter, please call: Triaia G Eavenson at (321) 368.2698 Fig. Name of Person Area Code Daytime Telephone Number Co.
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

Law Offices of Trigia G. Ewenson, LLC (Name of the Limited Liability Company as it now appears on our records.) Afforda Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on 23 April 2009 and assigned Florida document number 109000039592
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here: Eavenson Law, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
The new name must be distinguishable and contain 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) Melbourne, 12 32940
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Welbourne, F2 32940
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: New Registered Office Address: Ti jia G. Ewenson Esquire
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

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	lanager Luthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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		Suite 400	□ Remove
		Suite 400 Melbourne, FL 32940	Change
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Filing Fee: \$25.00