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| (Requestor's Name) | | | | | |
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| PICK-UP WAIT MAIL | | | | | |
| (Business Entity Name) | | | | | |
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COVER LETTER

| TO: Regist Division | ration Section on of Corporations | | | |
|---------------------------------------|--|--|--|--|
| SUBJECT: | Swope | e & Bright, P.L. | | |
| | | ited Liability Company | · . | |
| | rticles of Amendment and fee(s) are su correspondence concerning this matte | - | | |
| | • | Scott P. Swope | | |
| | | Name of Person | | |
| | | Swope Law, P.L. | | |
| | | Firm/Company | TAC 28 | |
| 3 | | Gulf to Bay Blvd, Ste 200 | ON DEC 27 | united to the state of the stat |
| | | Address | | r |
| | Cle | Clearwater, FL 33759-4315 | | |
| S E-mail addr | | City/State and Zip Code | PH IN IN IN | C |
| | | ope@SwopeLawPL.com to be used for future annual report notifical | STATE STATE | |
| For further infor | mation concerning this matter, please of | • | , | |
| | • | | ur agós | |
| Scott P. Swope, J.D. Name of Person | | at (727) 72 Area Code & Daytime T | 25-0200 elephone Number | |
| | | · | • | |
| Enclosed is a ch | eck for the following amount: | | | |
| \$25.00 Filing | Fee \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed | i) |
| MAILING ADDRESS: Registration Section | | STREET/COURIER Registration Section | ADDRESS: | |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limited I | Swope & Bright, P.L. Liability Company as it now appea Florida Limited Liability Company) | rs on our records.) | <u></u> |
|--|---|---|---------------------------|
| The Articles of Organization for this Limited Lia Florida document number L090001089 | | 11/10/2009 | and assigned |
| This amendment is submitted to amend the follow | wing: | | |
| A. If amending name, enter the new name of | the limited liability company her | <u>.e</u> : | |
| | Swope Law, P.L. | | |
| The new name must be distinguishable and end with "L.L.C." | the words "Limited Liability Compa | any," the designation | "LLC" or the abbreviation |
| Enter new principal offices address, if applica | ble: | | |
| (Principal office address MUST BE A STREET | ADDRESS) | | |
| Enter new mailing address, if applicable: | | | EC 27 P |
| (Mailing address MAY BE A POST OFFICE B | OX) | | |
| | | | ATE RIBA |
| B. If amending the registered agent and/or registered agent and/or the new registered offi | | our records, <u>enter</u> | the name of the new |
| Name of New Registered Agent: | · · · · · · · · · · · · · · · · · · · | | |
| New Registered Office Address: | 3000 Gulf to Bay Blvd, Ste | <mark>200</mark> ter Florida street ad | dvase |
| | Clearwater | | 33759-4315 |
| | City | , Florida | 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 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 Type of Action Name **Address MGRM** Margaret E. Bright 28870 US Highway 19 N., 3rd Floor Remove Clearwater, FL 33761 Margaret E. Swope MGRM 3000 Gulf to Bay Blvd, Ste 200 Add Clearwater, FL 33759-4315. Remove ☐ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) December 20 2011 Dated Signature of a member or authorized representative of a member Scott P. Swope, Managing Member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00