110000032994

(Requ	uestor's Name)	
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(City/	State/Zip/Phone	e #)
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COVER LETTER

то:	Registration Sec Division of Corp			
CUDIE		Mollengarden PLLC		
SUBJE	.C1:	Name of Limi	ited Liability Company	
The end	closed Articles of a	Amendment and fee(s) are sub-	mitted for tiling.	
Please r	eturn all correspon	ndence concerning this matter	to the following:	
		Daniel S. Rosenbaum		
			Name of Person	
		Rosenbaum PLLC		
			Firm/Company	
		250 South Australian Ave,	5th Floor	
			Address	
		West Palm Beach, FL 3346	01	
		_	City/State and Zip Code	
		drosenbaum@r-inlaw.com	to be used for future annual report notifi	cation)
For furt	her information co	oncerning this matter, please ca	•	Canony
Daniel	S. Rosenbaum		561 653-2900 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	e following amount:		
■ \$25	5.00 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

Rosenbaum Mollengarden PLLC (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 3/25/2010 and assigned Florida document number ______110000032994 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Rosenbaum PLLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 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 = Manager

AMBR = A	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			
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	enter change(s) here: (Attach additio		····
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	pecific and cannot be prior to date of filing or moles not meet the applicable statutory filing		
record specifies a delayed effi he 90th day after the record i	ective date, but not an effective t is filed.	ime, at 12:01 a.m. on t	the earlier
ed January 27	cel L. Derub		unqha
Signa	ature of a member or authorized representative	of a member	SECTION OF P
Daniel S. Rosenbaum, Manag	ger Typed or printed name of signee	197	<u>i</u> m
	Typed of printed frame of signee	.FL 01	
	Page 3 of 3		

Filing Fee: \$25.00