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S. HAWKES

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EXAMINER

COVER LETTER

1

TO:

Registration Section

Divisio	n of Corporations		•			
SUBJECT:	Sarah S. Hus	sein & Associates, P.L.				
SUBJECT:		mited Liability Company				
The enclosed Ar	ticles of Amendment and fee(s) are s	submitted for filing.				
Please return all	correspondence concerning this matt	ter to the following:				
	Sarah S. Hussein Name of Person					
	Sarah :	S. Hussein & Associates, P.L.				
Firm/Company						
	5482 Fort Caroline Road Address					
Jacksonville, FL 32277						
City/State and Zip Code sarahsh20@aol.com						
For further inform	E-mail address: nation concerning this matter, please	: (to be used for future annual report notification) e call:				
	Sarah S. Hussein	at (_904_)476-8574				
	Name of Person	Area Code & Daytime Telephone Number				
Enclosed is a che	ck for the following amount:					
\$25.00 Fiting	Fee \$\sum \$\frac{1}{2}\$\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$60.00 Filing Fe & Certificate of Certified Copy (additional copy is enclosed)	Status &			
,c ,ic	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

Sarah S. Hussein &	& Associates,	P.L.				
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appear	s on our records.)				
(A Florida Diffice L	Statinty Company)		2			
The Articles of Organization for this Limited Liability Company	and assigned					
Florida document numberL10000054113	orida document numberL10000054113					
This amendment is submitted to amend the following:			and assigned PAIR. 10			
A. If amending name, enter the new name of the limited liab	oility company her	<u>e</u> :	07.0			
Hussein & We	ebber, P.L.		The state of the s			
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Compa	ny," the designation	"LLC" or the abbreviation			
Enter new principal offices address, if applicable:	1100 Talleyrand Road					
(Principal office address MUST BE A STREET ADDRESS)	Jacksonville, FL 32206					
	US					
Enter new mailing address, if applicable:	5482 Fort Car	roline Road				
(Mailing address MAY BE A POST OFFICE BOX)	Jacksonville, FL 32277					
	US					
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ur records, <u>ente</u> s	the name of the new			
Name of New Registered Agent:						
New Registered Office Address:						
	Ent	er Florida street a	ddress			
	, 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 = Manager

MGRM = Managing Member

Title <u>Name</u> **Type of Action** <u>Address</u> MGR Sarah S. Hussein 5482 Fort Caroline Road ☐ Add Jacksonville, FL 32277 ∇ Remove Troy J. Webber MGRM 5482 Fort Caroline Road 🗸 Add Jacksonville, FL 32277 Remove 6 MGRM Sarah S. Hussein Addy. 5482 Fort Caroline Road Jacksonville FL 32277 <u>√</u> Remeve Ādd Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) May 25 Dated_ Signature of a member or authorized representative of a member Sarah S. Hussein Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00