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10:	Division of C		`* <u>*</u> *	•
SUBJI		N & WEBBER, PL		
57 ()		Name of Lim	ited Liability Company	
The en	closed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please	return all corres	spondence concerning this matter	to the following:	
		Troy J. Webber		
			Name of Person	
		Hussein & Webber, PL		
			Firm/Company	
		1608 Walnut Stret		
			Address	
		Jacksonville, Florida 3220	6	
			City/State and Zip Code	
		twebber@husseinandwebbe		
		E-mail address: (to be used for future annual report no	tification)
For fu	rther informatio	n concerning this matter, please c	all:	
Sarah	S. Hussein		9()4 444-3952 at ()	
	Nam	e of Person	Area Code Daytii	ne Telephone Number
Enclos	sed is a check fo	or the following amount:		
\$2	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**

HUSSEIN & WEBBER, PL							
(Name of the Limi	ted Liability Compa (A Florida Limited)	iny as it now appears on our records. Liability Company)					
The Articles of Organization for this Limited L Florida document number $\frac{L10000054113}{L10000054113}$	iability Company	were filed on 05/28/2010	8	and ass	igned		
This amendment is submitted to amend the foll	owing:						
A. If amending name, enter the new name o	of the limited liab	ility company here:					
N/A							
The new name must be distinguishable and contain the v	words "Limited Liabi	lity Company," the designation "LLC"	or the abbrevia	tion "L.l	C."		
Enter new principal offices address, if applicable:		1608 Walnut Street					
(Principal office address MUST BE A STREET ADDRE		Jacksonville, Florida 32206					
Enter new mailing address, if applicable:		1608 Walnut Street	· 2000 - 100 - 100	2015 1	Saling C Was		
(Mailing address MAY BE A POST OFFICE BOX)		Jacksonville, Florida 32206	71	1	et person		
B. If amending the registered agent and registered agent and/or the new registered o	or registered of	ffice address on our records, e:	語一< 四 可 可.(4)	2 AH II ine	of the nev		
Name of New Registered Agent:	Sarah S. Hussei	in					
New Registered Office Address:	1608 Walnut St	reet Enter Florida street address		 .			
	Jacksonville		rida <u>32206</u>				

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) as or removed from our records:	ithorized to manage	, <u>enter the title,</u>	name, and addr	ess of each person	being added
MGR = Manager AMBR = Authorized Member	NA				

<u>Title</u>	<u>Name</u>	Address	Type of Action
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effective date is listed, the date must be: If the date inserted in this block iment's effective date on the Department's	e specific and cannot be prick does not meet the appli	cable statutory filing	re than 90 days after filing) Pu	rsua he to 605 I not be liste
ecord specifies a delayed ene 90th day after the record	effective date, but n d is filed.	ot an effective tir	me, at 12:01 a.m. on	the earlie
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