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Chiumento & Associates, PLLC Michael D. Chiumento Michael D. Chiumento III Andrew C. Grant Ronald A. Hertel Vincent T. Lyon

Marc E. Dwyer, P.A. Marc E. Dwyer

Lewis A. Berns, P.A. Lewis A. Berns Of Counsel



Reply Tc Palm Coa. 145 City Place, Suite 3t Palm Coast, FL 3216 386-445-8900 T. 386-445-6702 Fa

Ormond Beac 1414 W. Granada Blvd , Suite Ormond Beach FL 3217

AP.L.L.C. of P.A. s

E-mail: Michael3(a palmeoastlaw.con Website: LegalTeamForLife.con

November 10, 2017

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RE: Amendment

Chiumento Dwyer Hertel Grant, P.L.

Dear Sir or Madam:

Enclosed for filing please find Articles of Amendment to Articles of Organization of Chiumento Dwyer Hertel Grant, P.L. Also enclosed please find our firm's check in the amount of \$30.00 which represents the \$25.00 filing fee and \$5.00 for a Certificate of Status. Kindly file the enclosed Amendment and forward the Certificate of Status to my attention at the Palm Coast office address listed above.

If you have any questions or require additional information please feel free to contact me.

Sincerely.

Caroline McNeil

Paralegal to Michael D. Chiumento, Esq.

Enclosures

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Chiumento Dwyer Hertel Grant, P.L.		17 AL
(<u>Name of the Limited</u>	d Liability Company as it now appears on our A Florida Limited Liability Company)	records.)
The Articles of Organization for this Limited Lia	bility Company were filed on 01/06/2011	and assigned
Florida document number L11000002976		
This amendment is submitted to amend the follow	wing:	# F.
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	(OX)	
B. If amending the registered agent and/o registered agent and/or the new registered offi		cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	address
		Elouida
	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 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

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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Scott Alan Selis, P.A.	145 City Place. Suite 301	Add
		Palm Coast, FL 32164	■ Remove
			□ Change
MGRM	Marc E. Dwyer, P.A.	145 City Płace, Suite 301	□ Add
		Palm Coast, FL 32164	■ Remove
MGR	Chiumento & Associates, P.A.	145 City Place. Suite 301	□ Add
		Palm Coast, FL 32164	■ Remove
			Change
MGR	Chiumento & Associates, PLLC	145 City Place, Suite 301	≅ Add
		Palm Coast. FL 32164	□ Remove
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Note: If the date inserted in t	the date of filing: It in the date of filing: It is the date of filing:		
ne record specifies a del The 90th day after the	ayed effective date, but not an effect record is filed.	tive time, at 12:01 a.m. on the	earlier of
November 10	2017		
101/			

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Typed or printed name of signee

Filing Fee: \$25.00