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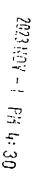
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: LAW Office of G	rant + Dozier, LLC
Name (of Limited Liability Company
The enclosed Articles of Amendment and fee(s) at	e submitted for filing.
Please return all correspondence concerning this n	
LAW OST	Name of Person Per of Grant & Dozier, LLC Firm/Company
123 N.	Apopka Av
	Adoress
wg rante	City/State and Zip Code 2 grant doz revlaw.com ress: (to be used for future annual report notification)
For further information concerning this matter, ple	
	at () 726 - 5/// Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
▼ \$25.00 Filing Fee ☐ \$30.00 Filing Fee Certificate of Sta	
Mailing Address: Registration Section	Street Address: Registration Section

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

LAW Office of GA	RAWT + DOZIER, LLC
(<u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number <u>L 1100004</u>	Company were filed on $\frac{4/4/2011}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the lim</u> William C	GRANT + LAW PARTNERS, LLC
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	123 N. Apopka Av. RESS) /NVEYNESS, FL 34450
(Principal office address MUST BE A STREET ADDI	RESS) /NVerness, FL 34450
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2023 1:0/-
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, enter the name of the new registered
	23 N. Apopka Av. Enter Florida street address
New Registered Office Address:	23 N. Apopka Av. Enter Florida street address
_/,	NVE (NESS , Florida, Florida
Now Desistand Agent's Signature if changing Registers	City Zip Code

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 Type of Action Address Title James R. Dozien 123 N. Apopka Av. DAdd

Averness F2 34450 Remove ______ □Change _____ □Add _____ □Change _____ Change _________□Add _____ Bremove _____ □Change _____ □Add

□Remove

_	
	
ective	date, if other than the date of filing: November 1, 2023 (optional) re date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.
e: If t	he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste
ument	's effective date on the Department of State's records.
ord sp	becifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
filed.	
ed	October 30 2023
	1/4/
	William 1. Frank
	Signature of a inember or authorized representative of a member