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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

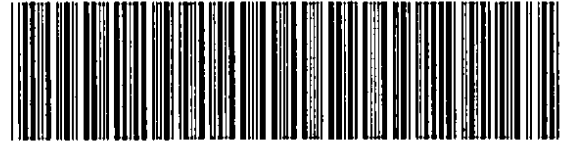
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2022 APR -7 AM 9:52

SECRETARY OF STATE
TALLAHASSEE, FL

4/11/2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LAING & WEICHOLZ, P.L.

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nancy Eisenberg

Name of Person

Laing & Weicholz, P.L.

Firm/Company

6111 Broken Sound Parkway NW, Suite 330

Address

Boca Raton, FL 33487

City/State and Zip Code

nancy@lwslegal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lora A. Esau, Esq.

561

416-1818

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 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 Address:

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



RECEIVED

FLORIDA DEPARTMENT OF STATE
Division of Corporations

2022 APR -7 AM 8:02

SECRETARY OF STATE
TALLAHASSEE, FL

March 21, 2022

NANCY EISENBERG
6111 BROKEN SOUND PARKWAY NW
SUITE 330
BOCA RATON, FL 33487

SUBJECT: LAING & WEICHOLZ, P.L.
Ref. Number: L11000055772

We have received your document for LAING & WEICHOLZ, P.L. and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a professional limited liability company must contain CHARTERED, PROFESSIONAL LIMITED LIABILITY COMPANY, P.L.L.C. or PLLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 622A00006622

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2022 APR -7 AM 9: 52

LAING & WEICHOLZ, P.L.

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

CLERK OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on May 11, 2011 and assigned
Florida document number L11000055772.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Laing, Weicholz, Schley, PLLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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

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>	<u>Address</u>	<u>Type of Action</u>
MGR	LAW OFFICES OF CHAD R. LAING, P.A.	6111 BROKEN SOUND PKWY NW, SUITE 330	<input type="checkbox"/> Add
		BOCA RATON, FL 33487	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	LAW OFFICES OF TODD WEICHOLZ, P.A.	6111 BROKEN SOUND PKWY NW, SUITE 330	<input type="checkbox"/> Add
		BOCA RATON, FL 33487	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	LAW OFFICES OF DALE W. SCHLEY, P.A.	6111 BROKEN SOUND PKWY NW, SUITE 330	<input checked="" type="checkbox"/> Add
		BOCA RATON, FL 33487	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated March 31, 2022

[Handwritten signature]

Signature of a member or authorized representative of a member

Chad R. Laing

Typed or printed name of signee

Filing Fee: \$25.00