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| | A Law Firm | ı of Lauri J. Goldstein & Assoc | riates, PLLC | | |
| SUBJE | (1: , <u></u> | Name of Lim | ited I lability Company | | |
| The enc | losed Articles of | Amendment and fee(s) are sub | mitted for filing. | | |
| Please r | eturn all correspo | indence concerning this matter | to the following: | | |
| | | Lauri J. Scher | | | |
| | | | Name of Person | | |
| | | A Law Firm of Lauri J. Go | ldstein & Associates, PLLC | | |
| | | | Firm/Company | , | |
| | | 1330 South Federal Highw | | | |
| | | | Address | | |
| | | Stuart, Florida 34994 | | | |
| | | | City/State and Zip Code | | |
| | | Lauritæl.Goldstein com | | | |
| | | l:-mail address: t | to be used for future annual report notifications | ation) | |
| For furt | her information c | oncerning this matter, please of | all: | | |
| Lauri J | | | 772 485 - 5594 | | |
| | Name o | (Person | Area Code Daytime T | Telephone Number | |
| Enclose | ed is a check for th | ie following amount: | | | |
| ≡ \$2: | 5.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | (2) \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) | |
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| Division of Corporations P.O. Box 6327 | | | • | The Centre of Tallahassee | |
| | Tallahassee, ! | FL 32314 | 2415 N. Monroe : | Street, Suite 810 | |

Tallahassee, Fl. 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A LAW FIRM OF LAURI J. GOLDSTEIN & ASSOCIATES, PLLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{09/27/2011}{1}$ and assigned Florida document number 4.11000110924 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: A Law Firm of Lauri J. Goldstein, PLLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 , Florida

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> | Type of Action |
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| i is filed | .) / |
| | 4/10/2021 |
| anca | Alle Holder |
| | Signature of almember or authorized representative of a member |
| | |

Filing Fee: \$25.00