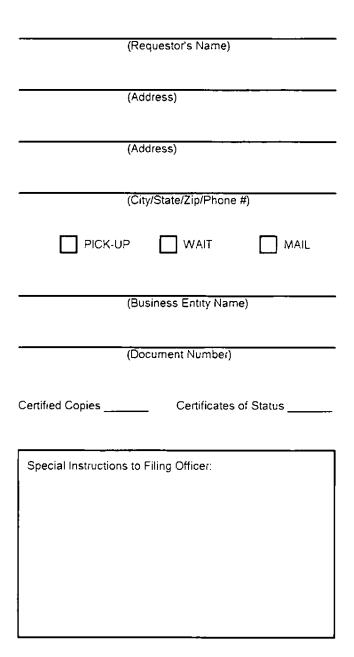
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Office Use Only





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COVER LETTER

TO: Registration S Division of Co		•		
	DINGS, LLC			
SUBJECT:	Name of Limi			
The enclosed Articles of	Amendment and fec(s) are sub-	mitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	J. Michael Coleman, Esq.			
		Name of Person		
	Coleman, Taylor, Klaus, D	oupe, Diaz & Torrez, P.A.		
		Firm/Company		
	4099 Tamiami Trail North	. Suite 201		
		Address		
	Naples, Florida 34103			
		City/State and Zip Code		
	mcoleman@chtlegal.com			
	E-mail address: (to be used for future annual report n	otification)	
For further information	concerning this matter, please ca	ill:		
Tina Day		239 298-5205 at ()		
Name (of Person	Area Code Dayı	ime Telephone Number	
Enclosed is a check for	the following amount:			
■ \$25.00 Fiting Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addre Registration	Section	Street Address: Registration S		
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on our reco d Liability Company)	rds.)
The Articles of Organization for this Limited Liability Compared Florida document number $\frac{L11000114512}{L11000114512}$.	ny were filed on 10/06/2011	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
Coleman Mediation Services, LLC		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LI	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		202
- meipar office and each in contract to the co	···	2021116
		
		ω.
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		• မုံ
		- -
B. If amending the registered agent and/or registered officingent and/or the new registered office address here:	e address on our records, <u>ent</u>	er the name of the new register
igent and/or the new registered office address here.		
N. D. S. L.		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	ress
	, 1	Florida
	City	Florida Zip Code

New Registered Agent's Signature, if changing Registered Agent:

2640 HOLDINGS, LLC

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 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
MGR	Margaret E. Coleman	4099 Tamiami Trail North, Suite 201	■Add
		Naples, Florida 34103	□Remove
			□Change
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Sective date, if other than the date of for a effective date is listed, the date must be specificate: If the date inserted in this block does a cument's effective date on the Department	ot meet the applicable	date of filing or more to e statutory filing re	(option than 90 days after fi quirements, this c	ling.) Pursuant to 605.	0207 :d a s
ecord specifies a delayed effective date, but s filed.	not an effective time	e, at 12:01 a.m. on t	he earlier of: (b)	The 90th day after	the
March 3	2024				
	1001	20			
	eller (1	Her-			
Signature	of a member or authorize	ed representative of a	member		