

L11000144857

04/07/2014 15:40 305-530-9409

Division of Corporations

LAMONT NEIMAN

of

Florida Department of State
Division of Corporations
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EFFECTIVE DATE
4-12-2014ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
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TALLAHASSEE, FLORIDA

GLOBAL MIGRATION LAWGROUP (SOUTHEAST), P.L.

(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 12/28/2011 and assigned
Florida document number L11000144857

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:FONTE IMMIGRATION FIRM, P.L.

The new name must be distinguishable and end with 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)901 Ponce De Leon Blvd.Suite 601Coral Gables, FL 33134

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)901 Ponce De Leon Blvd.Suite 601Coral Gables, FL 33134B. 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 addressCityFloridaZip CodeNew 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

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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	FONTE, KARI A.	901 Ponce De Leon Blvd.	<input checked="" type="checkbox"/> Add
		Suite 601	<input type="checkbox"/> Remove
		Coral Gables, FL 33134	
MGR	FONTE, KARI A.	111 NE 1ST STREET	<input type="checkbox"/> Add
		5TH FLOOR	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33132	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

E. Effective date, if other than the date of filing: 4/12/2014 (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated

April 7, 2014

Signature of a member or authorized representative of a memberKari A. Fonte

Typed or printed name of signer

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Filing Fee: \$25.00

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