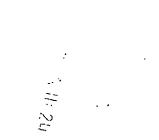
L12000015134

(Requestor's Name) (Address) (Address)	600
(City/State/Zip/Phone #)	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Office Use Only 5, C.	



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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations _.				
	TION LEGAL SERVICES. LI	l.C			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Jordan Lulich				
		Name of Person			
	Lulich & Attorneys				
		Firm/Company			
	1069 Main Street				
		Address			
	Sebastian, FL 32958				
	jordan@lulich.com	City/State and Zip Code			
	•	to be used for future annual report no	diffication)		()
For further information c	oncerning this matter, please c	all:			ヘジ
Jordan Lulich		772 589-5500		٠.	
Name o	f Person		me Telephone Number	,	
Enclosed is a check for the	ne following amount:			111:24	
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Co (additional cop	g Fee. of Status & opy	
Mailing Addres Registration S Division of C	Section	Street Address: Registration S Division of Co			
P.O. Box 632	-	The Centre of			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IMMIGRATION LEGAL SERVICE	
(Name of the Limite	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Lie Florida document number L12000015134	ability Company were filed on $\frac{02/01/2012}{}$ and assigned
This amendment is submitted to amend the follo	owing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and contain the we	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:
(Principal office address MUST BE A STREE)	T ADDRESS)
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE I</u>	BOX)
B. If amending the registered agent and/or reagent and/or the new registered office addres	egistered office address on our records, enter the name of the new registeres here:
Name of New Registered Agent:	Jordan Lulich, Esq.
New Registered Office Address:	1069 Main Street address
	Sebastian, Florida 37955
	City 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>	Address	Type of Action
MGR	Jordan Lulich	1069 Main Street	= Add
		Sebastian, FL 32958	□Remove
			Change
			□Add
			Remove
			☐ Change
			□Remove
			□Change ()
			Remove
			\(\sigma\) □ Change
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			Change
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ffective date, if other than the date of filing:	<i>L</i> ;	
fective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be price ote: If the date inserted in this block does not meet the appli ocument's effective date on the Department of State's records	cable statutory filing requirements, this date will not be lis	5.020 ted a
record specifies a delayed effective date, but not an effective is filed.	time, at 12:01 a.m. on the earlier of: (b) The 90th day aft	er the
ated July 9		
	horized representative of a member	

Filing Fee: \$25.00