

L12 0000 92475

(Requestor's Name)	
(Address)	
(Address)	4
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Ms. Timerman confirmed she	
is changing ner title maz.	
V5W 5/7/24	

Office Use Only



400433026414

07/46/24--01031--007 ••30.00

024 J 1 6 ET 3:50



07/05/2024

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Amendment to LLC

To whom this may concern:

Please see enclosed the amendment request and check of \$30 for filing fee & certificate of status.

This form is being filed to add Andrea TW, PLLC as an authorized member (AMBR), remove Andrea Timerman, Esq as managing member (MGRM), but leave her only as an manager (MGR).

Feel free to contact me if there are any questions or concerns,

Thank you in advance,

Andrea Timerman W.

Schonberg & Timerman PL

COVER LETTER

TO:

TO: Registration Sect Division of Corpo			
SUBJECT: Char	nge of Me	mber	
SUBJECT:	Name of Limit	ted Liability Company	
The enclosed Articles of A	mendment and fee(s) are subr	mitted for filing.	
Please return all correspond	dence concerning this matter t	o the following:	
	LAVEA	SCHUNDERG Name of Person	
	<u>Schonb</u>	DEEGS Timer	nan PL
	4000 H	Olywood Blu Address	2
	Holly won	City/State and Zip Code St - 1 M M 1 G Co o be used for future annual report not	<u> </u>
	into (a) E-mail address: (b)	o be used for future annual report not	TH'ON - WM
For further information con	cerning this matter, please ca	H:	
ANdrew Name of I	imerman w	at (<u>954</u>) <u>665</u> Area Code Daytin	ne 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 Se		<u>Street Address:</u> Registration Se	ection
Division of Co	rporations	Division of Co	rporations
P.O. Box 6327 Tallahassee, FI		The Centre of 7 2415 N. Monro	
Tallahassee, Fl	_ 32314	2415 N. Monro	be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Schonberg & Tin	nerman PL	
(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our records.) hability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on <u>07/17/2012</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		-)
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		-
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		ن
		50
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the name</u>	of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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 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
MAR.	Andrea Timermanit	54. 1050 PIN OAK ST, Holly	1000 [A. 33019]
			⊵∀Kemove
			<u>√</u> Z Change
AMBR	Andrea TW PLLC	1050 PIN DAK St. Hollywood F2 33019	tVAdd
	Hollywood fr 33019	□Remove	
		□Change	
			□ Add
			□Remove
			□Change
			□Add
			□Rетюvе
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change

	To clarify the amendment is as follow
	Add Andréa TW, PLLC as MEMBER (AMBR.
	change Andrea Timerman Esq. Grom MANAging Member (MGRM) to manager (MGR
Note:	effective date, if other than the date of filing: $\frac{7/5}{202}$ (optional) 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). If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
If the reco	ord 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 filed.
Dated	d July 5. 2024.
	Signature of a member or authorized representative of a member