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LAW OFFICES

· ARTABANE & BELDEN, P.C.

Attorneys and Counselors at Law 1320 19th Street, NW Suite 300 Washington, DC 20036-1636

Telephone: 202-861-0070 Facsimile: 202-833-9700 www.lawyers.com/artabane&belden

JOSEPH A. ARTABANE jaartabane@artabane-belden.com

September 12, 2014

BY FEDERAL EXPRESS

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re:

LaMarca & Steininger, LLC

Document No. L12000108040

Dear Sir or Madame:

The enclosed Articles of Amendment and fee in the amount of \$25.00 are submitted for filing to change the name of LaMarca & Steininger, LLC to Steininger & Company, LLC.

Please address all correspondence concerning the matter to me at the above address. For further information please call me at 202-679-0825.

Thank you for your attention to this matter.

Cordially,

JAA/slm

Enclosures: Check for \$25.00

Articles of Amendment ("name change")

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	A & STEININGER, LLC
(Name of the Limited Liabil (A Florid	lity Company as it now appears on our records.) la Limited Liability Company)
· ·	
The Articles of Organization for this Limited Liability (Company were filed on August 21, 2012 and assigned
Florida document number L12000108040	·
This amendment is submitted to amend the following:	•
A. If amending name, enter the new name of the lim	nited liability company here:
STEININGER & COMPANY, LLC	a Biv.
he new name must be distinguishable and end with the words "L	imited Liability Company," the designation "LLC" or the abbreviation L.C."
Enter new principal offices address, if applicable:	
<u> Principal office address MUST BE A STREET ADD</u>	RESS)
	- 34. - 01
Enter new mailing address, if applicable:	්
Mailing address MAY BE A POST OFFICE BOX)	
3. If amending the registered agent and/or regi	stered office address on our records, enter the name of th
egistered agent and/or the new registered office add	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Enter Fioriau street adaress
	, 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 Changing Registered Agent, Signature of New Registered Agent

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

<u>itle</u>	<u>Name</u>	<u>Address</u>	Type of Action
			
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Page 3 of 3

Filing Fee: \$25.00

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