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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 5018 (MSULTING LLC) Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kathiya J. Sole Name of Person
50te (MSUHTA LLC (to be changed to Sole Law PLLC)
P.D. Box 40144 Address
Joint Petersburg, F. L. 33743 Mity/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kottyyn Sole at (127) 754-0054 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee. FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



(Name of the Limited Liability Companion (A Florida Limited L	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L 12000/33024</u> .	were filed on $\frac{\sqrt{\sqrt{18}/7012}}{2}$ ar	nd assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
Sole Law PLLC		
The new name must be distinguishable and end with the words "Limit"L.L.C."	ited Liability Company," the designation "LLC" o	r the abbreviation
Enter new principal offices address, if applicable:	6528 (entral Ave.,	
(Principal office address MUST BE A STREET ADDRESS)	6528 (entral Ave., St. Petersburg, F.L.	33710
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	•	ome of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	Code
	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 608, 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 Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MUR	Jeffrey U. Sole	514 N. Nelson St.	Add
		Aclington, V.A. 22203	Remove
			_
			Remove
			Remove
			_
			_ Add
			_ Remove
			-
			Add
			Remove
			Add
			
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)					
	The native of this firm will be a law firm affering				
•	legal services in the State of Frecida. Consultation				
•	services will still be used to the extent they are				
	normally used in law sirms. Legal services will be				
	affered from professionally monsed attackys in Florida.				
Dated _	October 3 , 2013. This Firm will further be	additional			
	Signature of a number or authorized representative of a member	exarina of			
	Kathryn J. Sole Typed or printed name of signee	Current with Florida Bor			
	Page 3 of 3	Rules guiding etrical practices			
	Filing Fee: \$25.00	So attained?			