L13000049950

(Red	questor's Name)	
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(City	//State/Zip/Phone	e #)
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: YZ Law, 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:

Judy Karniewicz, Esq

Name of Person

The Karniewicz Law Group

Firm/Company

1406 W. Fletcher Avenue

Address

Tampa, Florida 33612

City/State and Zip Code

jrichie@tklg.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julie Richie

{.,,}813、962-0747

Name of Person

Area Code & Daytime 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 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

YZ Law, LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our record Limited Liability Company)	<u>ls.</u>)
The Articles of Organization for this Limited Liability (Florida document number L13000049950	Company were filed on April 4, 2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and end with the wo	ords "Limited Liability Company," the designa	ition "LLC" or the abbreviatio
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2019 APR TALL AHAS
B. If amending the registered agent and/or regi		m-< 0
B. If amending the registered agent and/or registered agent and/or the new registered office ad	stered office address on our records, <u>c</u> <u>dress here</u> :	enter the ham's of the her
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	eet address
	. Flor	rida
	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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGR	Angela Zervos	5453 Central Avenue	Add
		St. Petersburg, FL 3371	O Remove
			,
			Add
		AT-11	Remove
			Add
			Remove
•			_
			Remewo
			62 5 F
		· · · · · · · · · · · · · · · · · · ·	Addan-
		<u> </u>	Remove
			.
			Add
			Remove

D. If an	tending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
Dated	April 9, 2013 (1)
	Co Con Soll
	Signature of a member or authorized representative of a member
	Joel P. Yanchuck (
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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SECRETARY OF STATE