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S. ROBERTS

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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations			
Malvin Feir	iberg, P.L.			
SUBJECT:				
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Shaun H. Malvin, Esq.			
		Name of Person		
	Malvin Feinberg, P.L.			
		Firm/Company		
	501 East Las Olas Bouleva	rd, Suite 300		
	-	Address		
	Fort Lauderdale, Florida 3,	3301		
	shaun@malvinlaw.com	City/State and Zip Code		
	E-mail address: (to be used for future annual report no	otification)	
For further information c	oncerning this matter, please c	all:		
Shaun H. Malvin, Esq.		954 628-3939		
		at ()	me Telephone Number	
Name o	f Person	Area Code Dayti	me Telephone Number	
Enclosed is a check for the	ne 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 Addres	is:	Street Address:		
Mailing Address: Registration Section		Registration Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Company were filed on $\frac{\text{May}}{\text{Elorida document number}}$.	8, 2013 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company her	<u>e</u> :
Malvin Law, PLLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the des	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	20
(Principal office address MUST BE A STREET ADDRESS)	- 23
The spirit will be seen to be see	
	• · · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	<u></u>
(Mailing address MAY BE A POST OFFICE BOX)	···
B. If amending the registered agent and/or registered office address on our recagent and/or the new registered office address here: Name of New Registered Agent:	cords, <u>enter the name of the new reg</u> i
New Registered Office Address:	
	la street address
	Florida
	Zip Code
City	

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>	<u>Address</u>	Type of Action
MGR	Joshua B. Feinberg, Esq.	501 East Las Olas Boulevard, Suite 300	
	-	P. A. J. M. W. M. 20201	uite 300 Add ChangeAdd RemoveChangeAddAddRemove
		Fort Lauderdale, Florida 33301	≣Remove
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Shaun H. Malvin, Esq.	Chana H. Matria, P.					
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