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(Re	equestor's Name)	<u>- </u>
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(no	101633)	
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(12/2/2023)

COVER LETTER

		ation Sect n of Corpo				
a		der Law G	roup, LLC			
SUBJEC	:: <u></u>		Name of Lim	ited Liability Company		
The enclo	osed Art	ticles of Ar	mendment and fee(s) are sub	mitted for filing.		
Picase ref	turn all	correspond	lence concerning this matter	to the following:		
			Andrew Rader			
				Name of Person		
			Rader Law Group, LLC			
				Firm/Company		
			3111 N. University Drive.	Ste. 602		
				Address		
			Coral Springs, FL 33065			
			·	City/State and Zip Code		
			arader@raderlawgroup.com			
				o be used for future annual i	report notification)	
For furthe	er infort	nation con	cerning this matter, please co	ill:		
Andrew !	Rader			954 675 at ()	5-4609	
		Name of P	erson	Area Code	Daytime Telepho	one Number
Enclosed	is a che	ck for the	following amount:			
■ \$25.0	00 Filinį	g Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is encl		\$60,00 Filing Fee, Certificate of Status & Certified Copy tadditional copy is enclosed)
		Address:	vion	Street Ad		
	_	ration Sec on of Cor	ction porations	-	Registration Section Division of Corporations	
I	P.O. B	ox 6327	•	The Cer	itre of Tallahas	ssee
•	Tallaha	issee, FL	32314	2415 N.	Monroe Street	t, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 1177 17 7.1110: 30 Rader Law Group, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{5}{13} \frac{3}{2013}$ and assigned Florida document number <u>L1300</u>0070.902 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: 3111 N. University Drive Ste. 602 (Principal office address MUST BE A STREET ADDRESS) Coral Springs, FL 33065 3111 N. University Drive. Enter new mailing address, if applicable: Coral Springs, FL 33065 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

Ciry

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>	Name	Address	Type of Action
MGR	Kenneth Cutler	3111 N. University Drive, Suite 705	□Add
		Coral Springs, FL 33065	■Remove
			Change
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(If an e <u>Note</u>	tive date, if other than the date of filing: (optional) flective 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.
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Date	1 11/10 2023.
	(a) (a) (a)
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	Signature of a member or authorized representative of a member

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