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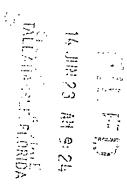
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COVER LETTER

TO: Registration S Division of Co			
SUBJECT: The La	aw Office of Eric P. Boles, P	LLC.	
	Name of Limi	ted Liability Company	
	f Amendment and fee(s) are subspondence concerning this matter		
	Eric P. Boles, Esq.	Name of Person	
	Eric Boles Law Firm,	PLLC. Firm/Company	
	3105 West Waters Av	e. Suite 211-A Address	
	Tampa, Florida 33614	City/State and Zip Code	
	ericboles@ericboleslav E-mail addross: (1	v.com to be used for future annual report notif	fication)
For further information	concerning this matter, please ca	all:	
Eric P. Boles, Esq. Name	of Person	at (<u>813</u>) <u>481-1441</u> Area Code Daytime	e 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

The Law Office of Eric P. I	Boles, PLLC. d Liability Compar A Florida Limited L	ny as it now appears on our rec iability Company)	ords.)				
The Articles of Organization for this Limited Lia	ability Company	were filed on <u>July 8, 2013</u>	3	aı	nd assig	gned	
Florida document number <u>L13000096449</u>							
This amendment is submitted to amend the follow	wing:						
A. If amending name, enter the new name of	the limited liabi	lity company here:					
Eric Boles Law Firm, PLI	.C.						
The new name must be distinguishable and end with the w		lity Company," the designation "	LLC" or th	e abbrevia	tion "L.	L.C."	•
Enter new principal offices address, if applica	ble:	3105 West Waters Ave	<u>, </u>				_
(Principal office address MUST BE A STREET	(ADDRESS)	Suite #211-A	<u></u>				-
		Tampa, Florida 33614					_
Enter new mailing address, if applicable:		3105 West Waters Ave					_
(Mailing address MAY BE A POST OFFICE B	BOX)	Suite #211-A		_ _			_
		Tampa, Floirda 33614					
B. If amending the registered agent and/oregistered agent and/or the new registered off			rds, <u>ent</u>	er the n	ame o	f the 1	<u>1ew</u>
Name of New Registered Agent:	Eric P. Boles	, Esq.		<u> </u>	_ 	·	
New Registered Office Address:	_3105 West W	V <mark>aters Ave, Suite #211-A</mark> Enter Florida street add	iress	LAH VS	∭ 2:	7	
	Tampa		Florida	33614	~~~	i	
New Registered Agent's Signature, if changing Re	egistered Agent:	City		Zip	Códe ⊖ ∾	1	
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regist being filed to merely reflect a change in the re company has been notified in writing of this c	r and complete p tered agent as p egistered office o	performance of my duties, rovided for in Chapter 60	and I at 5, F.S. C	n familio Ir, if this	ır with docun	and nent is	the

Page 1 of 3

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Remove
			Add
			☐ Remove
			□ ∧dd
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			Add
			☐ Remove

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	ate, if other than the date of filing:
e date this	ate, if other than the date of filing:
	ocument is filed by the Florida Department of State)

Page 3 of 3

Filing Fee: \$25.00