## L13000/49578

(Re	questor's Name)	-
(Add	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificate:	s of Status
Special Instructions to Filing Officer:		
		-
NAne	Chan	<u>,                                     </u>
	Office Use Or	



400253986664

12/02/13--01033--018 \*\*30.00

13 DEC -2 PM 3 O

T. Sussel DEC 4 2013



## **COVER LETTER**

TO: Registration Secti Division of Corpo			M. Comment
SUBJECT:	<del> </del>	De Law, LLC Llability Company	
The enclosed Articles of An	nendment and fee(s) are submi	tted for filing.	
Please return all correspond	ence concerning this matter to	the following:	
		Name of Person  Law Firm/Company	LLC
	822 N	AlA Suite	<u>, 3l 0</u>
	Ponte Kennetha E-mail address: (10 b	Vedra, FL 32 City/State and Zip Code Qiulien and ho De used for Juture annual report notification	082 pelaw. com
For further information con-	cerning this matter, please call	:	
Kennett Name of P	na Julien erson	at (904) 515 - 09 Area Code & Daytime Tele	phone Number
Enclosed is a check for the	following amount:		
□ \$25.00 Filing Fee	X\$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

**MAILING ADDRESS:** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Julien H	tope Law, LL	.C.
( <u>Name of the Limited Liability</u> (A Florida Li	Company as it now appears on imited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Co Florida document number	ompany were filed onO	22 2013 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
Julien & Hope La	iw, LLC	
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	N/A	<b>∄</b> ∴ <b>3</b>
(Principal office address MUST BE A STREET ADDRI	ESS)	<u> </u>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	N/A	LED -2 PM 3: 00
B. If amending the registered agent and/or registered agent and/or the new registered office addr		records, enter the name of the new
Name of New Registered Agent:	<u>A</u>	
New Registered Office Address:	Enter F	Torida street address
		, Florida
	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, <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	Address <u>T</u>	vpe of Action
U/A			Add
·			Remove
			_
<del></del>		<b>A</b>	Add
		LANASSEE, FLORIDA	Add Remove
		nis.	PR 3
		ROA	Add
			Remove
			Kemove
			Add
			Remove
			Add
			Remove
			Add
			Remove

f amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
d Nov 22, 2013.
Kennetha Julien
Signature of a member or authorized representative of a member
Kennethal Julien
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

DEC -2 PM 3: