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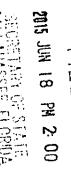
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Johnson and Snider PL 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:
Emily A. Snider Name of Person
Johnson and Snider, PL Firm/Company
1927 NW 13th Street Address
Gaines ville, FL 32609 City/State and Zip Code
johnson. and . Snider (a) mail. (on E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Emily A. Snider at (352) 376-3297 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 3, 2015

EMILY A. SNIDER JOHNSON AND SNIDER, PL 1927 NW 13TH STREET GAINESVILLE, FL 32609

SUBJECT: JOHNSON & SNIDER, PL

Ref. Number: L14000028909

We have received your document for JOHNSON & SNIDER, PL and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 915A00011624

Neysa Culligan Regulatory Specialist II NECEIVED

JN 11 PM 2: 57

AHASSIE, FLORIDA

LAW OFFICES OF

JOHNSON AND SNIDER, P.L.

1927 N.W. 13¹¹ STREET, SUITE A • GAINESVILLE, FLORIDA 32609
MAILING ADDRESS: P.O. BOX 5279 • GAINESVILLE, FLORIDA 32627-5279
Tell: (352) 376-3297 • FAX; (352) 371-1798
E-MAIL: johnson.and.snider@gmail.com

STEPHEN KERR JOHNSON EMILY ALICE SNIDER

June 18, 2015

Via fax only
Florida Department of State
Division of Corporations: Registration
(850) 245-6030

Re: Corporate Name change to Stephen K. Johnson, PLLC

Good Morning Neysa:

This letter serves to confirm that the principal for Stephen K. Johnson, P.A. and Stephen K. Johnson, PLLC are the same person. Mr. Johnson will be filing as the PLLC.

Sincerely,

LAW OFFICES OF JOHNSON AND SNIDER, P.L.

Emily A. Snider

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2015 JUN 18 PM 2: 00

The Articles of Organization for this Limited Liability Company as it now appears on our records.

The Articles of Organization for this Limited Liability Company were filed on February 20, 2014 and assigned Florida document number 14000028909.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Stephen K. Johnson, PLLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"

Enter new principal office address, if applicable:

Or Change

(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:

No Change

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

If amending or removed	Authorized Person(s) authorized to from our records:	manage, enter the title, name, and address of o	each person being added
MGR = M	anager uthorized Member		
Title	<u>Name</u>	Address	Type of Action
AMBR	Emily A. Snider	1927 NW 13th Street	D Add
	•	Gainesville, FL 32609	Remove
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e, if other than the date of filing: <u>June 30, 20 5</u> (optional) the 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

Page 3 of 3

Filing Fee: \$25.00