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Amend

JUN 4 2019 I ALBRITTON

## **COVER LETTER**

Division of C	orporations		
	s' Den, Attorneys at Law		
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Jonathan May		
		Name of Person	
	The Lions' Den. Attorneys	at Law	
	<del></del> .	Firm/Company	
	1395 Brickell Avenue, Sui	· •	
		Address	<del></del>
	Miami, FL 33131		
	jonmay@lionsdenjustice.co	City/State and Zip Code m	
	E-mail address: (	to be used for future annual report notifi	cation)
For further information	n concerning this matter, please ca	all:	
Jonathan May		786 9730686	
Name	e of Person	Area Code Daytime	Telephone Number
Enclosed is a check for	r 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:

TO:

**Registration Section** 

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 Lions' Den, Attorneys at Law, PLEC		
( <u>Name of the Limited Liability Co</u> (A Florida Lim	mpany as it now appears on our records. ited Liability Company)	)
The Articles of Organization for this Limited Liability Comp	pany were filed on 4/1/19	and assigned
Florida document number 1.14000089236		
his 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 I	Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		2019
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
<del></del>		-p ii
B. If amending the registered agent and/or registered egistered agent and/or the new registered office address		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	
	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 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>	Address	Type of Action
AMBR	Christopher Cook	4128 41st Way, West Palm Beach, FL 33407	<b>⊟</b> Add
			🗀 Remove
			Change
			Remove
			☐ Change
	<del></del>		D Add
			Remove
		<u></u>	Change
			Add
			☐ Remove
			□ Change
			☐ Remove
			Change
			Add
			□ Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. Effective date, if other than the date of filing:
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated
Signature of a member or authorized representative of a member  Janathan 196  Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00