# L14000134882

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only



03/15/21--01041--022 \*\*25.00

2021 11:00 1 + 51110: 4-2



<b>COVER</b>	LET	TER
--------------	-----	-----

TO: Registration Section Division of Corporations

SUBJECT: Obront, Corey & Schoepp, PLLC

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:

Michael James Corey

Name of Person

Obront Corey, PLLC

Firm/Company

100 S. Biscayne Blvd., Suite 800

Address

Miami, Florida 33131

City/State and Zip Code

mcorey@obrontcorey.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael James Corey at (<u>305</u>)<u>373-1040</u> Area Code Daytime Telephone Number Name of Person 2021 12 1 121 10: 12 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 Certificate of Status & (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 Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Obront, Corey & Schoepp, PLLC	
( <u>Name of the Limited Liability Company as it now appears on our records.</u> (A Florida Limited Liability Company)	)
The Articles of Organization for this Limited Liability Company were filed on	and assigned
Florida document number L14000134882	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
Obront Corey, PLLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LEC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, <u>enter the agent and/or the new registered office address here</u> :	ie name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street address	
, Flor	ida

### 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
			Add
			Remove
			□ Change
			🗆 Add
			🗋 Remove
		<u> </u>	Change
			🗆 Add
			Remove
			Change
			🗆 Add
			Remove
			□Change
			□ Add
			Remove
			Change
<u> </u>			□Add
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

	·				
			·····		
· · · ·					
		-	*	•	
		·· <u>-</u> ·			
				- <u></u>	

• •

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.

2021 Dated \_\_\_\_\_March 8 Signature of a member or authorized representative of a member Michael James Corey

Typed or printed name of signee

Filing Fee: \$25.00