## K14000168104

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## DocuSign Envelope ID: 838518AE-A375-4232-A23C-F79287B18E8E CUVER LETTER

TO: Registration S Division of Co			
CUDITY CT.	blic Adjusters LLC		
3000ECT.	Name of Lin	nited Liability Company	<del></del>
The enclosed Articles of	f Amendment and fee(s) are sul	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Angela Gambuzza		
	, <u> </u>	Name of Person	
	c/o Linda Solash-Reed, P.	L.	
		Firm/Company	
	871 Outer Rd Ste C		-
	<del></del>	Address	
	Orlando FL 32814		
		City/State and Zip Code	
	info@lsrlawyer.com		Ú
For firster in Committee		to be used for future annual report no	tification)
	concerning this matter, please c	alf:	
Linda Solash-Reed		at () 804-2915	
Name o	of Person		me Telephone Number
Enclosed is a check for t	he following amount:		
₩ \$25.00 Filing Fee	S30.00 Filing Fcc & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration !		Registration Se	
Division of C		Division of Co	

Tailahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## DocuSign Envelope ID: 838518AE-A375-4232-A23C-F79287B18E8E ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Expert Public Adjusters ELC  (Name of the Limit	ited Liability Compar (A Florida Limited L	ny as it now appears lability Company)	on our records.)		
The Articles of Organization for this Limited I. Florida document number L14000168104	Liability Company	were filed on $\frac{10/2}{}$	7/2014	and assig	gned
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited liabi	lity company her	<u>e</u> :		
The new name must be distinguishable and contain the	words "Limited Liabil	ity Company," the des	signation "LLC" or	the abbreviation "L.L.	C."
Enter new principal offices address, if appli	cable:				<u> </u>
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>			2	<u> </u>
		·		<u> </u>	<u> </u>
				17	
Enter new mailing address, if applicable:					<u> 26:</u>
(Mailing address MAY BE A POST OFFICE	(BOX)			<u></u>	3
			<del></del>	35	ᇎᄪ
B. If amending the registered agent and/or agent and/or the new registered office addressed agent.  Name of New Registered Agent:	Linda Solash-Ro	eed, P.L.	cords, <u>enter the</u>	name of the new	registere
New Registered Office Address: 871 Outer Rd Ste C			la street address		·
	Orlando	i.mer i mirit		22014	
	Orlando	City	, Florid	la Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:	•		•	
I hereby accept the appointment as register provisions of all statutes relative to the propaction as register accept the obligations of my position as registing filed to merely reflect a change in the company has been notified in writing of this	ed agent and agro per and complete istered agent as p registered office	performance of n proyided (syrin)Cl	ny duties, and I hapter 605, F.S leoghiry that t	am familiar with . Or, if this docum	and tent is

If Changing Registered Agent, Signature of New Registered Agent

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Trainenung Authorized rerson(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
MGR	Adam Gambuzza	1555 Lake Howell RoadSuite C-204	
		Winter Park FL 32789	■Remove
		<del></del>	□Change
MGR	Angela Gambuzza	13792 Heaney Ave	<b>≣</b> Add
		Orlando FL 32827	□Remove
			□Change
			Remove 22 A
			Likemove Tribulation The Change of the Chang
			DChange
			□Add
			Remove
			Change
<del></del>			□ Add
			□Remove
			□ Change

If amending a	ny other information, enter change(s) here: (Attach additional sheets, if no	ecessary.)
	<u> </u>	
		<del>.</del>
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		~
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		2:
		<del></del>
<u>Note:</u> If the dat	if other than the date of filing:	tional) Fer filing.) Pursuant to 605.0207 his date will not be listed as
record specific d is filed.	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:	(b) The 90th day after the
Dated	acy 5 2022. Angla GN	
	Signature of a member or authorized representative of a member	
	Angela Cambuzza	
	Typed of printed name of signee	·

Filing Fee: \$25.00