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FILED SECRETARY OF STATE TALLAHASSEE, FLORIO

24/20

* COVER LETTER

	istration Sec ision of Corp			
SUBJECT:	Coverage	Counsel, PLLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	l Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		Jonathan P. Picard		
			Name of Person	
		Picard Law, PLLC		
			Firm/Company	
		4440 PGA Blvd., Su	ite 600	
			Address	
		Palm Beach Garden	s, FL 33410	
			City/State and Zip Code	·····
		jpicard@picardlawoff		
		·	to be used for future annual report notif	ication)
For further in	nformation co	ncerning this matter, please ca	ail:	
	Name of	Person	at () Area Code Daytime	e Telephone Number
Enclosed is a	check for the	e following amount:		
■ \$25.00 F	iling 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:

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

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

Coverage Counsel, PLLC

15 MAR 31 PM 3: 39

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{11/19/14}{1}$ and assigned Florida document number_L14000179548 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Picard Law, PLLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 4440 PGA Blvd., Suite 600 Enter new principal offices address, if applicable: Palm Beach Gardens, FL 33410 (Principal office address MUST BE A STREET ADDRESS) 4440 PGA Blvd., Suite 600 Enter new mailing address, if applicable: Palm Beach Gardens, FL 33410 (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: New Registered Office Address: Enter Florida street address Florida City

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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