

214 000 180 177

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900387038999

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
22 MAY -9 PM 3:00

T. MATTHEWS

JUN 30 2022

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LCO LAW LLC

\_\_\_\_\_  
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:

NATALIA OUELLETTE-GRICE

\_\_\_\_\_  
Name of Person

LCO LAW LLC

\_\_\_\_\_  
Firm/Company

2901 W. BUSCH BLVD. SUITE 805

\_\_\_\_\_  
Address

TAMPA, FL 33618

\_\_\_\_\_  
City/State and Zip Code

NATALIA@LCO.LAW.FL.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NATALIA OUELLETTE-GRICE

813 842-6664  
at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for 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:**

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**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

LCO LAW LLC

22 MAY -9 PM 3: 00

(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 11/20/2014 and assigned  
Florida document number L14000180177.

This 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 Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

2901 W. BUSCH BLVD. SUITE 805

**(Principal office address MUST BE A STREET ADDRESS)**

TAMPA, FL 33618

**Enter new mailing address, if applicable:**

2901 W. BUSCH BLVD. SUITE 805

**(Mailing address MAY BE A POST OFFICE BOX)**

TAMPA, FL 33618

**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:

NATALIA OUELLETTE-GRICE

New Registered Office Address:

2901 W. BUSCH BLVD. SUITE 805

*Enter Florida street address*

TAMPA

*City*

, Florida

33618

*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>	<u>Address</u>	<u>Type of Action</u>
AMBR	NATALIA OUELLETTE-GRICE	2901 W. BUSCH BLVD. SUITE 805	<input type="checkbox"/> Add
		TAMPA, FL 33618	<input type="checkbox"/> Remove
		(UPDATING FOR LEGAL NAME CHANGE)	<input checked="" type="checkbox"/> Change
AMBR	JOHN LAWLESS	14502 N DALE MABRY HWY STE 200	<input type="checkbox"/> Add
		TAMPA, FL 33618	<input checked="" type="checkbox"/> Remove
		(NO LONGER A SHAREHOLDER)	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

AMENDMENTS FOR ADDRESS UPDATE AND TO REFLECT SOLE OWNERSHIP OF THIS LLC IS BY  
ATTORNEY NATALIA OUELLETTE-GRICE FKA NATALIA OUELLETTE

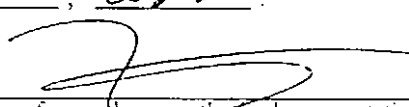
**E. Effective date, if other than the date of filing:** 5/4/2022 **(optional)**

*(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 May 4, 2022

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

NATALIA OUELLETTE-GRICE

\_\_\_\_\_  
Typed or printed name of signee