15000018277

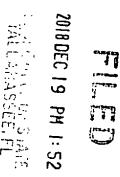
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

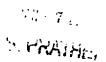
Office Use Only



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COVER LETTER

TO: Registration Sec Division of Corp	tion orations		
	e Kozan White PLLC		
SUBJECT:	Name of Limit	led Liability Company	
	Amendment and fee(s) are submodence concerning this matter t		
	Ciara Wheeler		
		Name of Person	
	McDonald Fleming Moorho	ead	
	-	Firm/Company	
	127 Palafox Place, Suite 20	00	
		Address	
	Pensacola, FL 32502		
		City/State and Zip Code	·
	enwheeler@pensacolalaw.co		<u> </u>
	E-mail address: (t	to be used for future annual report notif	ication)
For further information co	oncerning this matter, please ca	ill:	
Ciara Wheeler		850 378-2444	
Name of	Person	at () Area Code Daytime	: Telephone Number
Enclosed is a check for th	e 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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Moorhead De Kozan White PLLC	2018	
(Name of the Limited Liability Compa (A Florida Limited)	eny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L15000028277</u> .		
This amendment is submitted to amend the following:	53. · · · · · · · · · · · · · · · · · · ·	
A. If amending name, enter the new name of the limited liab	ility company here:	
Moorhead Law Group, PLLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	127 Palafox Place	
(Principal office address MUST BE A STREET ADDRESS)	Suite 200	
	Pensacola, FL 32502	
Enter new mailing address, if applicable:	127 Palafox Place	
(Mailing address MAY BE A POST OFFICE BOX)	Suite 200	
	Pensacola, FL 32502	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her Name of New Registered Agent:	ffice address on our records, <u>enter the name of the nev</u> e:	
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida street address	
	Florida	
	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 = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Change
			Add
			Remove
			Change
			Remove
			Change
			Remove
			Change
			□ Remove
			Change
			□ Add
			□ Remove
		_	□ Change

amending any other information, e	nter change(s) here: (Attach additional sheets, i)	f necessary.)
	<u> </u>	<u> </u>
<u> </u>	<u> </u>	
	-	
	<u> </u>	
		
		
		
		
		
ffective date, if other than the date (January 1, 2019 of filing: ecific and cannot be prior to date of filing or more than 90 day	(optional)
an effective date is listed, the date must be speciote: If the date inserted in this block do ocument's effective date on the Departm	es not meet the applicable statutory filing requirement	is, this date will not be listed a
e record specifies a delayed effe The 90th day after the record is	ctive date, but not an effective time, at 12 s filed.	:01 a.m. on the earlier o
ated December 12	2018	. 21
		2018 DEC
Signat	ure of a member or authorized representative of a member	
Stephen R. Moorhead		C 19 PI
<u> </u>	Typed or printed name of signee	PH 1: 53
		71 T

Page 3 of 3

Filing Fee: \$25.00