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COVER LETTER

Division of Corporations
SUBJECT: YNE WITHELD LAW ONLY UC 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 Whitfield Name of Person
The World Law Broup, UC
9730 trumpet me loop
City/State and Zip Code
MRAY DE-mail address: (to be used for future Innual report notification)
For further information concerning this matter, please call:
MMUK MANUA at (904) 3740-0534 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & \Bigcup \\$55.00 Filing Fee & \Bigcup \\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

(additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 45 00012/08.	were filed on Juve 29, 2015 and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liab</u>	
The new hame 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: (Principal office address MUST BE A STREET ADDRESS)	2030 Starkey Blud New POR Richey 181 27655
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3030 Starkey BIVA New Port Richey, FL 39655
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	ffice address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code
New Registered Apent's Signature if changing Registered Apent:	

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 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>	Address	Type of Action
AMBR	MICHUL WINTSTELD	3030 Starkey Blvd New Forth chey, E 34	[SV/Add
		New forther they, 12 34	Remove
			Change
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