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SECRETARY JESTALE FALLAHASSEE, FLOSING

COVER LETTER

Divis	sion of Corpo	rations				
SUBJECT:	Pereda Law G	roup, PLLC				
Name of Limited Liability Company						
		Robert Pereda Robert Pereda Name of Person Pereda Law Group, PLLC Firm/Company 13418 SW 128 Street Address Miami, FL 33186 City/State and Zip Code robert@rublawmiami.com E-mail address: (to be used for future annual report notification) mation concerning this matter, please call: Name of Person 229-8922 at (Area Code Daytime Telephone Number sek for the following amount: Gree \$30.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate Opy (additional copy is enclosed) Certified Copy Certified Copy (additional copy is enclosed)				
The enclosed	Articles of An	nendment and fee(s) are submi	tted for filing.			
Please return	all correspond	ence concerning this matter to	the following:			
		Robert Pereda				
			Name of Person			
		Pereda Law Group, PLLC				
			Firm/Company			
		13418 SW 128 Street				
			Address	·	 	
		Miami, FL 33186				
			City/State and Zip Code		<u>.</u>	
		-				
		E-mail address: (to	be used for future annual re	eport notification)		
For further in	formation con	cerning this matter, please call	:			
at ()		-8922				
		Daytime Telephor	ne Number			
Enclosed is a	check for the f	following amount:				
■ \$25.00 Fi.	ling Fee		Certified Copy		Certificate of Status &	

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TO:

Registration Section

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

Pereda Law Group, PLLC		
(<u>Name of the Limited Liability</u> (A Florida Li	Company as it now appears on our recommitted Liability Company)	ords.)
he Articles of Organization for this Limited Liability Con	npany were filed on 7/23/15	and assigned
orida document number L15000126105		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	d liability company here:	
OB LAW, PLLC		
he new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "L	
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES	(22)	Δ-
The span of the grant box 17001 Be 11 STREET 1100 Res		SE O
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nton many mailing address if applicable.		IM 6: 5
nter new mailing address, if applicable:		
Auiling address MAY BE A POST OFFICE BOX)	 	
If amonding the posistaned agent and/or register	red effect address on our recei	uda autau tha ua-ua af th.
. If amending the registered agent and/or register gistered agent and/or the new registered office addres	s here:	rds, enter the name of the
		
Name of New Registered Agent:		
	·····	
New Registered Office Address:	Enter Florida street add	Irass
	Lance I tortuu sireet uuu	r Cau
	City	Florida Zip Code
	Cuy	zip Coae

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>	Type of Action
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ective date, if other than the	date of filing: be specific and cannot be prior to date of	filing or more than 90 days	optional) after filing.) Pursuant	10 605.0
te: If the date inserted in this blo cument's effective date on the Do	ock does not meet the applicable stat partment of State's records.	utory filing requirements	s, this date will not b	e listed
record specifies a delayed he 90th day after the rec	effective date, but not an ef ord is filed.	fective time, at 12:	01 a.m. on the ϵ	earlier
ed March 24	, 2020	P) _		
	Signature of a member or authorized rep			

Page 3 of 3

Filing Fee: \$25.00