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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: Ros	senberg (t	ited Liability Company	LLC
	9	, , , <u>,</u>	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Casey,	ummings Name of Person	
	Rosenb	erg T Cummings Firm/Company ()	PLLC
	104 SE 8	3 th Ave Address	
	Fort Lau	derdale, FL 33	3301
	Casey C	city/State and Zip Code. City/State and Zip Code. City/State and Zip Code. Compared to be used for future annual report notification.	nail. Cong
\sim	ncerning this matter, please ca		
CaseyCu	mmings	at(267) 980-	-2429 mg ~
Name of	Person	Area Code Daytime	Telephone Number
Englosed is a check for the	e following amount:		A G
\$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)
. /		•	
Registra	NG ADDRESS: tion Section of Corporations	STREET/COURIE Registration Section Division of Corpora	ı
P.O. Bo		Clifton Building 2661 Executive Cen	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rosenberg &	Cummings PUC
(Name of the Limited	Liability Company as if now appears on our records.) A Florida Limited Liability Company)
The Articles of Organization for this Limited Liab	bility Company were filed on 01/04/2016 and assigned 2559.
This amendment is submitted to amend the follow	ving:
A. If amending name, enter the new name of the Nosenberg, Cummiliate the new name must be distinguishable and contain the work	
Enter new principal offices address, if applicat	ole:
(Principal office address MUST BE A STREET	ADDRESS)
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BO	<u>OX)</u>
B. If amending the registered agent and/or registered agent and/or the new registered office	r registered office address on our records, enter the name of the new ce address here:
Name of New Registered Agent:	Lasey R Commings Bill 104 SE 8th Ave Enter Florida street address
New Registered Office Address:	Enter Florida street address
	Fort Lawlendall Florida 5330 / 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

Page T of 3

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = M $AMBR = A$	anager uthorized Member		
Title A-P	Name Daniel Rosenberg	Address 1 E Broward Blvd# Fort Landerdale, FL 333	Type of Action O Q Q Add
<u>AMB</u> R	Casey R Cummings PUC		Change
AMBR.	Paul D Edwards P.A.	· 	□ Change
<u>AMBR</u>	Daniel Rosenberg P.A.	4 East Broward Blw Fort Landerdale, Fl333	
		MASSEL FLORIDA	Change Add Remove Change
			☐ Remove

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effective date is list	her than the date ted, the date must be s	pecific and can	not be prior to	date of filing or	more than 90 days	(optional) s after filing.) Pur	rsuant to 605.
	erted in this block of			e statutory fili	ng requirement	s, this date will	not be lister
ument's effective	date on the Depart	ment of State	s records.			≥	2016
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Filing Fee: \$25.00