# L16000108834

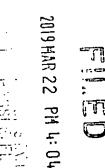
(Requ	iestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificate	s of Status
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C. GOLDEN

APR -2 2019

## . COVER LETTER

	Registration Se Division of Cor			
SUBJEC		JSHING LLC		
SUBJEC	.I:	Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		LISA B. KEPICS		
		DICKS & NANTON, P.A.	Name of Person	
		520 N ORLANDO AVE #	Firm/Company	
		WINTER PARK, FL 3278	Address 99	<u></u>
		LISA@DNAGENCY.COM	City/State and Zip Code	
		E-mail address: (	to be used for future annual report notif	ication)
For furth	er information c	oncerning this matter, please ca	all:	
LISA KI			407 215-7564 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	ne following amount:		
\$25.0	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:

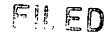
TO:

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



2019 HAR 22 PM 4: 04

DNA PUBLISHING LLC

(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  $\frac{6/6/2016}{1}$ and assigned Florida document number 1.16000108834 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Retirement Publishing LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address \_, Florida \_\_\_

### 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:

or remove	ved from our records:	
	Manager - Authorized Member	

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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`an effective date is liste Note: If the date insert to the locument's effective of	ted in this block doe	es not meet the ap	plicable statutory fil	more than 90 days after fili ing requirements, this da	ng.) Pursuant to 605.0207 ite will not be listed as
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e record specifies The 90th day aft	a delayed effecter the record is	ctive date, but filed.	t not an effective	time, at 12:01 a.m	1. on the earlier o
Dated MARCH 19	<del> </del>	. 2019			
		<i>\</i>	/_/		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00