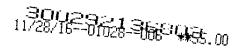
116000113566

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COVER LETTER

TO:	Registration Se Division of Cor		91.			
		ED NOTARIES, LLC				
SUBJE	C1:	Name of Limi	ted Liability Company			
The enc	losed Articles of	Amendment and fee(s) are subr	nitted for filing.			
Please r	eturn all correspo	ndence concerning this matter t	to the following:			
		RYAN VANBUSKIRK				
			Name of Person		_	
		PREFERRED NOTARIES	, LLC			
		···	Firm/Company		•	
		19827 MORDEN BLUSH	DR			
			Address		-	
		LUTZ, FL 33558				
		RVANBUSKIRK77@GMA	City/State and Zip Code IL.COM		-	
		E-mail address: (t	o be used for future annual report notific	ation)	2018 SE(
For furt	her information c	oncerning this matter, please ca	ıll:		2	1
	VANBUSKIRK		813 753-6430 at ()		2018 NOV 28 SECRETARY ALLAHASSEE	
	Name o	f Person	Area Code Daytime 7	Telephone Number	THE TO	Acres 1
					0 F	
Enclose	ed is a check for the	ne following amount:			₩ 그	
□ \$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &	

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

PREFERRED NOTARIES, LLC	
(<u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears on our records.) da Limited Liability Company)
he Articles of Organization for this Limited Liability (lorida document number $\frac{116000113566}{1}$	Company were filed on and assigned and assigned
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the lin	nited liability company here:
•	mited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADD	PRESS)
nter new mailing address, if applicable: **Aailing address MAY BE A POST OFFICE BOX)**	
www.g.www.gg.mii Dirii Ool Ollied Don)	HANSSI
If amonding the registered agent and/or resi	, , , , , , , , , , , , , , , , , , ,
gistered agent and/or the new registered office add	istered office address on our records, enter the name of the
	GS TA
Name of New Registered Agent:	OT A
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zin 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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	PATRICIA VANBUSKIRK	80 HUMMINGBIRD CT	
		BAILEY, CO 80421	
			■ Remove
			Change
			Add
			□ Remove
			_ □ Change
			Remove
			Change
			AR AR TRemove
			SAY CO
			·
		1000	□ Remove
		-	☐ Change
			Add
			□ Remove
			☐ Change

· · · · · · · · · · · · · · · · · · ·	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
	ECONO NOV	
	NS 2 8	
	TO T	
f an effective Note: If th	date, if other than the date of filing: (optional) (optional) (optional) (e date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605, he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as effective date on the Department of State's records.	0207 d as
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie th day after the record is filed.	ro
Dated	21 November 2016.	
	Signature of a member or authorized representative of a member	
	RYAN VANBUSKIRK	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00