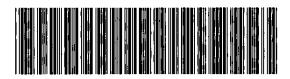
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COVER LETTER

TO:

	gistration Se vision of Cor				
aun in om		D MARTIN SOLIS, LLC.			
SUBJECT:		Name of Lin	nited Liability C	ompany	
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filir	ng.	
Please returi	n all correspo	ndence concerning this matter	to the following	ng:	
		CHRISTINE MARTIN SO	DLIS		
			Name of	Person	
		ARIAS AND MARTIN SO	OLIS, LLC.		
			Firm/Co	mpany	
		10328 W FLAGLER ST			
			Addr	ess	
		MIAMI, FL 33174			
		ARIASMSOLISLAW@GN	City/State an AAIL.COM	d Zip Code	
	. 3	E-mail address: (to be used for fu	ture annual report notif	ication) ^
or further in	nformation co	oncerning this matter, please ca	all:		٠.
CHRISTIN	E MARTIN S	OLIS	30: at (
	Name of	Person		Code Daytime	e Telephone Number
Enclosed is a	a check for th	e following amount:			
■ \$25.00 F	Ü	□ \$30.00 Filing Fee & Certificate of Status	Certifie	Filing Fee & d Copy al copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registra Division P.O. Bo	NG ADDRESS: ation Section in of Corporations in 6327 seee, FL 32314		STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 32	n ations nter Circle

TO ARTICLES OF ORGANIZATION OF

(Name of the Lin	nited Liability Co	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Clorida document number			
his amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited l	iability company here:	
ARIAS & MARTIN-SOLIS, PLLC.			
The new name must be distinguishable and contain the	words "Limited L	iability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	N/A	
Principal office address MUST BE A STRE	ET ADDRESS	<u> </u>	
Enter new mailing address, if applicable:		N/A	
Mailing address MAY BE A POST OFFICE	E BOX)		
B. If amending the registered agent and registered agent and/or the new registered of	-		enter the name of the
Name of New Registered Agent:	N/A		
New Registered Office Address:		Enter Florida street address	97 100 100 100 100 100 100 100 100 100 10
		, Flori	
		Cire	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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
N/A			□ Add
			□ Remove
			Change
			Add
		- 	Remove
			Change
			Add
			Remove
			⊕ Change
			□ Ādd
			☐ Add ☐ Remove ☐ Change
			一型 Change
			□ Add
			Remove
			Change
			
			□ Remove
			☐ Change

required to operate as a professional organization. Therefore, we would li	ike to change our LLC to a PLLC.
We would also like to change the word "and" to the symbol "&" and inse	rt a hyphen between Martin and Solis.
Therefore, our name would change from Arias and Martin Solis, LLC. to	Arias & Martin-Solis, PLLC.
I am the registered agent and a managing partner with authority to make	these changes even though there is not
a substantial difference in the name change.	
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Fective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date of filing or ote: If the date inserted in this block does not meet the applicable statutory fil cument's effective date on the Department of State's records.	(optional) r more than 90 days after filing.) Pursuant to 605.02 ling requirements, this date will not be listed
record specifies a delayed effective date, but not an effective The 90th day after the record is filed.	e time, at 12:01 a.m. on the earlier
ned APYI) 18 2017.	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00