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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | Certificates | s of Status |
| Special Instructions to F | iling Officer: | |
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| то: | Registration Se Division of Con | | | |
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| | Cruz Law, | PLLC | | |
| SUBJI | ECT: | Name of Lim | nited Liability Company | |
| | | Nane of 13h | med Butting Company | |
| The en | closed Articles of | Amendment and fee(s) are sub | omitted for filing. | |
| Please | return all correspo | indence concerning this matter | to the following: | |
| | | Roberto Cruz, Esq. | | |
| | | | Name of Person | |
| | | Cruz Law, PLLC | | Daytime Telephone Number Fee & \$60.00 Filing Fee, Certificate of Status & |
| | | ···· | Firm/Company | |
| | | PO Box 858 | Name of Person Firm/Company Address 286-0858 City/State and Zip Code com Iress: (to be used for future annual report notification) case call: 407 712-0348 at (| |
| | | | Address | |
| | | Windermere, FL 34786-08 | 58 | |
| | | | City/State and Zip Code | |
| | | robertocruz@lawyer.com | | |
| | | E-mail address: (| to be used for future annual report notif | ication) |
| For fur | ther information c | oncerning this matter, please c | all: | |
| Robert | to Cruz | | | |
| | Name o | f Person | | Telephone Number |
| Enclose | ed is a check for th | ne following amount: | | |
| \$ 2: | 5.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed) | Certificate of Status & Certified Copy |

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

| (Name of the Limi | ted Liability Compa (A Florida Limited I | ny as it now appears nability Company) | on our records.) | |
|---|---|---|-------------------------|-------------------------|
| The Articles of Organization for this Limited I lorida document number | | were filed on | 08/05/2016 | and assigned |
| his amendment is submitted to amend the following | lowing: | | : | <u>∓</u> 1 8 |
| If amending name, enter the new name of Cruz Law, PLLC | of the limited liab | <u>ility company her</u> | e: | EB T |
| he new name must be distinguishable and contain the | words "Limited Liabil | ity Company," the des | ignation "LLC" or the | abbreviation L.L.C |
| Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) | | | | <u> </u> |
| | | 5401 S Kirkman I | Rd., Orlando, FL32 | 819意言 영 |
| Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE | ' BOX) | PO Box 858, Win | dermere, FL 34786 | -0858 |
| i. If amending the registered agent and | - | | our records, <u>ent</u> | er the name of the |
| egistered agent and/or the new registered o | iffice address her | <u>e</u> : | | |
| Name of New Registered Agent: | Johanna Jackso | મા | | |
| New Registered Office Address: | 6206 Golden D | | | ··· |
| | | Enter Floria | la street address | |
| | Windermere | | , Florida | |
| | | City | • | 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

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> | Address | Type of Action |
|--------------|--------------------|--------------------------------|----------------|
| MGR | Roberto Cruz, Esq. | PO Box 858, Windermere,FL34786 | |
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| ffective date, if other than the | date of filing: | Date of Filing | | (option | al) | |
| an effective date is listed, the date mus lote: If the date inserted in this blo | t be specific and car ack does not meet | nnot be prior to d t the applicable | late of filing or more e statutory filing re | than 90 days after fil quirements, this da | ing.) Pursuant to 605 ate will not be liste | i.0207 (ed as ti |
| ocument's effective date on the De | | | | , | | |
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| e record specifies a delayed The 90th day after the reco | | e, but not a | n effective tim | e, at 12:01 a.r | n. on the earli | er of: |
| February 12 | : | 2018 | | | | |
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00