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| (Req | uestor's Name) | |
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| Certified Copies | Certificate | s of Status |
| Special Instructions to F | Filing Officer: | |
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COVER LETTER

| TO: Registration Se Division of Cor | | | | |
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| SUBJECT: | Name of Lim | Lews PCC | | |
| The enclosed Articles of | Amendment and fec(s) are sub | mitted for filing. | | |
| Please return all correspo | ondence concerning this matter | to the following: | | |
| | | | | |
| | | Name of Person | | |
| | | | | |
| | | Firm/Company | | |
| | 2/04 | Zura Forest fr1. Address | | |
| | Palm Kristin E-mail address: | Coast, Fl. 321 City/State and Zip Code 1 - Stewart @ out loo to be used for future annual report notific | | 2818 NOV 26 |
| For further information c | oncerning this matter, please ca | all: | : ii _ | • |
| Kriot | in Stewart | at (386) 283-3 Area Code Daytime | 3347 35 | ő E U |
| Name o | f Person | Area Code Daytime | Telephone Number | : 52 |
| Enclosed is a check for the | he following amount: | | | |
| S25.00 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 Statu Certified Copy (additional copy is encl | |

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

| Kristin Nathews | s. PLLC |
|--|---|
| (Name of the Limited Liability Compar (A Florida Limited L | ny as it now appears on our records.) lability Company) |
| The Articles of Organization for this Limited Liability Company Florida document number <u>L17000013960</u> . | were filed onand assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liability from Enter the new name must be distinguishable and contain the words "Limited Liability from the new name must be distinguishable and contain the words "Limited Liability from the new name must be distinguishable and contain the words "Limited Liability from the new name must be distinguishable and contain the words "Limited Liability from the new name of the limited liability from the new name of the new | Stewart PLLC |
| Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | 2 laguna Forest trl. Palm Coast, fl. 32164 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 2 lagua Forest trl. Palm Coossi, Fl. 32164 |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here | fice address on our records, enter the name of the new |
| Name of New Registered Agent: New Registered Office Address: | Kristin Stewart = = = |
| Pale | Cost. Florida 307 CH City Zip Gode |
| New Registered Agent's Signature, if changing Registered Agent: | 0 52 0 52 |
| I hereby accept the appointment as registered agent and agre | e to act in this capacity. I further agree to comply with the |

If Changing Registered Agent, Signature of New Registered Agent

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 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 | Kristin Stewart | 2 lagua Forest tr | <mark>], </mark> ⊠ Add |
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| MGR | Kristin Hatthews | 2 lagua forest til. | Add |
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| fecti | ive date, if other than the date of filing: (optional) |
| | tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Parsuant to 605.02 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed |
| | nent's effective date on the Department of State's records. |
| | |
| rec | cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed. |
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| | fut least () |
| | Signature of a member or authorized representative of a member |

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Filing Fee: \$25.00