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## **COVER LETTER**

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TO: A Registration Section Division of Corpor	on rations		
SUBJECT:	Tordan Rich Name of Lim	nards, PLL C ited Liability Company	
The enclosed Articles of Arr	nendment and fee(s) are sub	mitted for filing.	
Please return all corresponde	ence concerning this matter	to the following:	
•	Jad	lan Richards, E	<u>sq.</u>
	Jorg	clan Richards, P	الر
	401	E. Las Olas Bl. Address	ud. Suite 1400
		derdale, Florida City/State and Zip Code	
-	E-mail address: (t	an O jordannichan to be used for future annual report notific	dslaw-com
For further information conc	erning this matter, please ca	all:	
Jordan Name of Pe	Richards	at (\$\frac{\frac{8}{2}\frac{8}{2}}{\text{Area Code}}\)	4782 Celephone Number
Enclosed is a check for the fo	ollowing amount:		
\$25.00 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:
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

Jorda	N Richards, PLLC Liability Company as it now appears on our records.) Florida Limited Liability Company)
( <u>Name of the Limited</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liab	ility Company were filed on 2/22/17 and assigned 348.
This amendment is submitted to amend the following	ing:
A. If amending name, enter the new name of the	ne limited liability company here:
The new name must be distinguishable and contain the word	Is "Limited Liability Company," the designation "LLC" or the abbreviation "L LC."
Enter new principal offices address, if applicable	
(Principal office address MUST BE A STREET A	ADDRESS)
Enter new mailing address, if applicable:	<u> </u>
(Mailing address MAY BE A POST OFFICE BO	<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office	North
Name of New Registered Agent:	Jordan Richards
New Registered Office Address:	Jordan Richards 401 East Lax Olas Blud. Su'ite 1400 Enter Florida street address'
-	Fort Lauderdale, Florida 33301  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 = M AMBR = A	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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fan effecti <u>Vote:</u> Ift	date, if other the total transfer of the date inserted in a effective date of the date of	late must be spo this block do	ecific and es not m	cannot be preet the app	licable stat	itory filing	requirements	s, this date w	Pursuant to 60:	5.0207 ( ed as tl
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Filing Fee: \$25.00