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COVER LETTER

Div	ision of Cor	porations			
SUBJECT:	Valeria R. Owens, Public Accountant, PLLC				
30 55 201.		Name of Lim	ited Liability Company		
The enclosed	Articles of	Amendment and fee(s) are sub-	mitted for filing.		
		ndence concerning this matter	_		
		Valeria R. Owens			
			of Limited Liability Company are submitted for filing. matter to the following: Name of Person ublic Accountant, PLLC Firm/Company aite 1 Address 7 City/State and Zip Code mail.com dress: (to be used for future annual report notification) ease call:		
		Valeria R. Owens, Public A	Accountant, PLLC		
			Firm/Company		
		1418 Norman St., Suite I			
			Address		
		Palm Bay, FL 32907			
		valeriastaxservice@gmail.co	-	 	
		•		notification)	
For further is	nformation c	oncerning this matter, please ca	all:		
Valeria R. C	wens		at (
	Name o	f Person	Area Code Day	ytime Telephone Number	
Enclosed is a	check for th	ne following amount:			
■ \$25.00 F	filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy	

MAILING ADDRESS:

TO:

Registration Section

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 Limited Liabil	lity Company as it now appears on our recorda Limited Liability Company)	<u>ds.</u>)
(A FIORC	ш сиписа ыврину сопрану)	
he Articles of Organization for this Limited Liability (Company were filed on March 17, 2017	and assigned
orida document number L17000061634	·	
is amendment is submitted to amend the following:		
If amending name, enter the new name of the lin	nited liability company here:	
aleria R. Owens, Accountant, PLLC		
ne new name must be distinguishable and contain the words "Lir	mited Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		E CT.
Principal office address MUST BE A STREET ADD	RESS)	6 * []
The party of the court of the c		5 60
-tour norm mothing address if applicables		ŧ
Inter new mailing address, if applicable:		<u> </u>
<u> 1ailing address MAY BE A POST OFFICE BOX</u>		
	***	· · · · · · · · · · · · · · · · · · ·
. If amending the registered agent and/or regi gistered agent and/or the new registered office add		ls, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	557
		lorida
	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

AMBK = A	Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
		 	□ Remove
		 -	
			□ Add
			□ Remove
			☐ Remove
			Change
			Add
			Remove
			☐ Change
			Add
			□ Remove
			Change
			. C++
			Remove
			Change

Tective date, if other than the date of filing: February 16, 2018 (optional) In effective 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 desert inserted in listed the date must be specific and cannot be applicable statutory filing requirements, this date will not be cument's effective date on the Department of State's records. It record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earth of the specified and after the record is filed.	—
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February 16 2018	
Malale, al Ch Klyss ned	
Signature of a member or authorized representative of a member	
Valeria R. Owens	

Page 3 of 3

Filing Fee: \$25.00