

L17000068369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

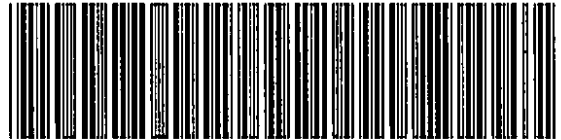
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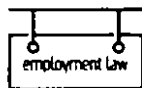
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2020 MAY 21 PM 4:18

Amend
Name Chg

JUN 12 2020

I ALBRITTON



the shingle, pllc

2000 PGA Blvd. Suite 4440, Palm Beach Gardens, Florida 33408
203.278.2291
traci.halky@theshinglewpb.com

May 18, 2020

Registration Section
Florida Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Name Change and Purpose Amendment

Dear Sir or Madam:

I enclose the Articles of Amendment and corresponding fee for filing. Please direct all correspondence and to me at the above address and telephone number.

Best,

Traci Halky

Traci Halky
The Shingle, PLLC
FL Bar No. 95043

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

The Shingle, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on March 27, 2017 and assigned
Florida document number L17000068369.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The Shingle, PLLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C.":

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2000 PGA Boulevard

Suite 4440

Palm Beach Gardens, FL 33408

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2000 PGA Boulevard

Suite 4440

Palm Beach Gardens, FL 33408

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

2000 PGA Boulevard, Suite 4440

Enter Florida street address

Palm Beach Gardens

City

Florida 33408

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

MGR = Manager
AMBR = Authorized Member

[illegible]

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Purpose: the practice of law

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated May 18 2020

Signature of a member or authorized representative of a member

Signature of a member or authorized representative of a member

Traci Halky

Typed or printed name of signee

Filing Fee: \$25.00