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TO: Registration Section Division of Corporations

Botkin Law Group, LLC
SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Matthew I. Botkin			
		Name of Person		
	Botkin Law Group, LLC			
		Firm/Company		- F25
	2151 NE 51 CT, Suite Eas	it	•	CRET
		Address		15.85 15.85 17.85
	Fort Lauderdale, FL 3330	3		R TO
		City/State and Zip Code		₩
	matthewbotkin@gmail.con	1		<u>- 골</u>
	E-mail address: (to be used for future annual report notific	cation)	5
For further information of	concerning this matter, please c	all:		
Matthew I. Botkin		954 945-5155		
Name o	of Person	/	Telephone Number	
Enclosed is a check for t	he following 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

Botkin Law Group, LLC		
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability C	ompany were filed on 04-06-17	and assigned
Florida document number L1700007760	•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		3/4
(Principal office address MUST BE A STREET ADDR	RESS)	T RATE
		2 557
		7 82
Enter new mailing address, if applicable:		3
(Mailing address MAY BE A POST OFFICE BOX)		<u>မှ ရှိသို့</u>
		6 07
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		nter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid	la 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>	Name	Address	Type of Action
MGR	Danielle G. Botkin	2151 NE 51 CT, Suite East	□ Add
		Fort Lauderdale, FL 33308	_ □ Remove
			■ Change
AMBR	Matthew I. Botkin	2151 NE 51 CT, Suite East	
		Fort Lauderdale, FL 33308	□ Remove
			☐ Change
			SECRE TALL AH
			CRETARY OF STATE CREMAN 2 OF STATE Change 16
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ctive date, if other than the date of filing:	
effective date is listed, the date must be specific and cannot be prior to date: If the date inserted in this block does not meet the applicable sument's effective date on the Department of State's records.	of filing or more than 90 days after filing.) Pursuant to 605.0
ecord specifies a delayed effective date, but not an ne 90th day after the record is filed.	effective time, at 12:01 a.m. on the earlie
ed 05-02-17 ,	
1/100 O	
	representative of a member

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Filing Fee: \$25.00