

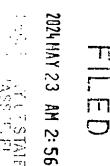
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200430065332

07/01/04--01019--00: \*\*20.00



## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Johnson Anderson PLLC		
(Name of the Limited Liability Comp (A Florida Limited	oany as it now appears on our rec I Liability Company)	ords.)
The Articles of Organization for this Limited Liability Compan	y were filed on 8/23/2017	and assigned
Florida document number L17000179796		
his amendment is submitted to amend the following:	•	
A. If amending name, enter the new name of the limited lia	bility company here:	
Johnson Litigation Group, PLLC		
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "I	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		202
Principal office address MUST BE A STREET ADDRESS)		2 Z Z T
		3 : 30 A III
nter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·
Mailing address MAY BE A POST OFFICE BOX)		2: S
		(ř. <b>6</b> )
. If amending the registered agent and/or registered office gent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, ent	er the name of the new registo
		<del>-</del>
New Registered Office Address:	Enter Florida street add	trace
<del></del>	City	Florida Zip Code
	City	ыр сын

## 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>	<u>Name</u>	Address	Type of Action
Mgr	Scott Anderson	2011 W Cleveland St, Ste F	
		Tampa, Fl 33606	■Remove
			[]Change
			□Add
			□Remove
		· · · · · · · · · · · · · · · · · · ·	□Change
			bbAdd
			□Remove
		<del></del>	Add
			□Remove
			□ Change
			□Reinove
			ElChange
			□Remove

\_\_\_\_\_ □Change

lf am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
,	
,	
,	
,	<u> </u>
lfan ef <u>Note:</u>	ive date, if other than the date of filing:  [Optional]  [Sective 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
e recor	rd 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 led.
Dated	<u>5/20/24</u>
	Signature of a member or authorized representative of a member
	Taxiof S. Chalson  Typed or printed name of signee