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(((H21000130198 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SALMON LEGAL GROUP, P.L.

Account Number : I20180000045 Phone : (786)508-2020 Fax Number : (786)209-3030

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: assistant@hvwlawgroup.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **HVW LAW GROUP LLC**

Certificate of Status	0
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COVER LETTER

TO: Registratio Division of	n Section Corporations		(((H21000130198 3))
	LAW GROUP LLC	,	•
SUBJECT:	Name of Li	mited Liability Company	
The enclosed Article	es of Amendment and fee(s) are su	bmitted for filing.	
Please return all con	respondence concerning this matte	er to the following:	
	EMERALD WILLIAMS	s, ESQ.	
		Name of Person	
	HVW LAW GROUP, LI	C	
	·	Firm/Company	
	2701 NW BOCA RATO	N BLVD. STE 207	: 2
		Address	
	BOCA RATON, FL 334	31	
		City/State and Zip Code	
	ASSISTANT@HVWLA		
		: (to be used for future annual report notification)	
For further informat	tion concerning this matter, please	call:	F
EMERALD WILL	IAMS, ESQ	954 255-5655 at ()	
N	ame of Person	Area Code Daytime Telephone N	umber
Enclosed is a check	for the following amount:		
■ \$25.00 Filing F	Fee \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) Certified Copy	.00 Filing Fec, rtificate of Status & rtified Copy litional copy is enclosed)
Mailing A		Street Address:	
	tion Section	Registration Section Division of Corporations	
P.O. Box	of Corporations	The Centre of Tallahassee	
	see, FL 32314	2415 N. Monroe Street, St	iite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H210001301983)))

HVW LAW GROUP, LLC					
(Name of the Limited	d Liability Compan A Florida Limited L	ty as it now appears or lability Company)	our records.)		
The Articles of Organization for this Limited Lia	bility Company (were filed on 12.5.2	017	_ and assigned	d
Florida document number 1.17000249203	·			_	
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of	the limited liabi	lity company here:			
The new name must be distinguishable and contain the wor	rds "Limited Liabili	ty Company," the design	nation "LLC" or the abbre	viation "L.L.C."	
Enter new principal offices address, if applicable: 2701 NW BOCA RATON BLVD, STE 207		7			
(Principal office address MUST BE A STREET	ADDRESS)	BOCA RATON, FL	. 33431	BLVD, STE 207	202
				lis .	Ann
Enter new mailing address if analisables		2701 NW BOCA R	ATON BLVD, STE 201	7 P. C.	<i>7</i> 0 − −
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ox)	BOCA RATON, FI	 	*	
	<u> </u>			27.73 27.73	<u>Ö</u>
B. If amending the registered agent and/or regagent and/or the new registered office address Name of New Registered Agent:	gistered office ac <u>here</u> :	ldress on our reco	rds, <u>enter the name o</u>	f the new reg	<u>isterec</u>
New Registered Office Address:	2701 NW BOCA	RATON BLVD. ST	E 207		
TIET TERMINET VITTE ANDICES.		Enter Florida s			
	BOCA RATON		Florida _33431		
		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 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 (((H21000130198 3)))

<u> </u>	Name	Address	Type of Action
AMBR	SARA HOROWITZ PA	9469 BOCA RIVER CIRCLE	🗆 Add
		BOCA RATON, FL 33434	≅ Remove
AMBR	EMERALD WILLIAMS PA	2701 NW BOCA RATON BLVD, STE 207	□ Add
		BOCA RATON, FL 33431	□Remove
			■ Change
AMBR	KATIE VARSEGI PA	2701 NW BOCA RATON BLVD. STE 207	⊡Add
		BOCA RATON, FL 33431	Remove
			Change
			DAdd
			□Remove
			ER -
			Remove
			□Change
N			□Add
			□Remove
			□ Change

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Signature of a member or authorized representative of a member		MARCH 31, 2021	
Signature of a member or authorized representative of a member	Dated	. •	
	Dated	\sim	