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#### **COVER LETTER**

TO:

Registration Section Division of Corporations

CARMICHAEL & RICKERSON, PLLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and feets) are submitted for filing. Please return all correspondence concerning this matter to the following: CAREY DUNCAN CARMICHAEL, JR. Name of Person CARMICHAEL & RICKERSON, PLLC Firm/Company 310 SE Hernando Avenue Address Lake City, FL 32025 City/State and Zip Code carey@thecarmichaellawfirm.com h-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Carey D. Carmichael, Jr. Daytime Telephone Number Name of Person Enclosed is a check for the following amount: \$55,00 Filing Fee & ☐ \$60.00 Filing Fee. □ \$30,00 Filing Fee & **≡** \$25.00 Filing Fee Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, Fl. 32303

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

CARMICHAEL LAW, PLLC

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

(7/ 1 101103	1,111111001	Machines Consisting y			
The Articles of Organization for this Limited Liability C Florida document number 1.17000256719	'ompany	were filed on 12/15/2017	SECR.	an <b>21</b> 3ss	igned
This amendment is submitted to amend the following:				J&H 27	4 ± 4 .
A. If amending name, enter the new name of the lim	ited liab	ility company here:	<i>∀</i> ; :	PX	11
CARMICHAEL & RICKERSON, PLLC			1 (7 10) 4	पं	
The new name must be distinguishable and contain the words "Lim	ited Liabil	lity Company," the designation "LLC" or	the abbrevi	ation 1	E.C."
Enter new principal offices address, if applicable:		CARMICHAEL & RICKERSON			
(Principal office address MUST BE A STREET ADDR		310 SE HERNANDO AVENUE			
,		LAKE CITY, FL 32025			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	STARE LIEDNIANINA AVENUE				
		LAKE CITY, FL 32025			
B. If amending the registered agent and/or registered agent and/or the new registered office address here:			name of	the nev	v registerec
Name of New Registered Agent: CART	CAREY DUNCAN CARMICHAEL, JR.				
New Registered Office Address: 310 S	E HERN	ANDO AVENUE			
		Enter Florida street address			
LAKE	ECITY	, Florid	Ja <u>32025                                   </u>		
		Ciņ	Z	lip Code	

#### New Registered Agent's Signature, if changing Registered Agent:

Thereby 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
AMBR	TISHEENA RICKERSON	310 SE HERNANDO AVE	<b>=</b> Add
		LAKE CITY, FL 32025	□Remove
			□ Change
			2029 JAN COMPANIES
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ne 90th day after the r	ecord is filed.			
January 23	2020			
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Typed or printed name of signee