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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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9 FEB 12 MID 04

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January 26, 2019

CASSIDY LOUTUS 1193 SE PORT ST LUCIE BLVD, #234 PORT ST LUCIE, FL 34952

SUBJECT: LOUTOS LAW GROUP LLC

Ref. Number: L18000067428

We have received your document for LOUTOS LAW GROUP LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist III

Letter Numbe

Letter Number: 519A00001871

2019 FFB 1.2

COVER LETTER

TO: Registration Sec Division of Corp			
· SUBJECT:	Loutos Lo	aw Group LLC led Liability Company	<u> </u>
The enclosed Articles of A	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspon	ndence concerning this matter t	o the following:	
	Cassidy	Loutus Name of Person	
	1193 SE Por-	+ Saint Lucie!	1vd # 234
SUBJECT: Loutos Law Group LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filting. Please return all correspondence concerning this matter to the following: Cassidy Loutos Name of Person Loutos Law Group Firm Company 1193 SE Port Saint Lucie Vod ## 234 Address Port Saint Lucie, Florida 34952 City/State and Zip Code 1 awyer & 10wtos [awgroup. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Cassidy Loutos Name of Person at (772) 284 - 2030 Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certified Copy (certified Copy) (certified Copy)			
For further information co	oncerning this matter, please ca	11:	
Cassid Name of	Y Loutos Person	at (<u>772</u>) <u>28</u> Area Code Da	4 - 2030 ytime Telephone Number
Enclosed is a check for th	e following amount:		
□ \$25.00 Filing Fee	-	Certified Copy	Certificate of Status &

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

Loutos Law	Group, L	LC
(Name of the Limited Liability Compa (A Florida Limited l		
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000067428</u> .	were filed on	03/08/18:8 and assigned
This amendment is submitted to amend the following:		ED ED
A. If amending name, enter the new name of the limited liab	oility company here	THE PLANT OF THE PARTY OF THE P
Loutos Law PLLC		를 2
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the des	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	850 NW	Federal Hwy #214
(Principal office address MUST BE A STREET ADDRESS)	stuart,	Flonda 34994
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1193 SE Port St	Port Saint Lucie Blvd. #234 · Lucie, Flonda 34952
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		our records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florid	a street address
		Florida
	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 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 = A	AMBR = Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
			Change FEB Add E
			P Add T T T T T T T T T T T T T T T T T T
			B Change
			□ Add
			Remove
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			☐ Remove
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		- <u>-</u> -	□ Remove
			Characa Characa

also changing designation from LLC +0 PLLC Specific purpose of the entity: The entity is a law firm. The entity provides legal semices. Effective date, if other than the date of filing: (optional state) of the date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing framework of a member of date will not be listed as to document's effective date on the Department of State's records. 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 1/14/19	-	changing name from Loutos Law Group L	۲,
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Signature of a member or authorized representative of a member			ıf:
	Dated	1/14/19	
Cassidy Loutos esa.		Signature of a member or authorized representative of a member	
		Cassidy Loutos, esq.	

Page 3 of 3

Filing Fee: \$25.00