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Division of Corporations Fas Number | 1 (854)417-4393

Account mass : MODD, BUCKEL AND CARMIDASE, PLLC Account masser : [2017080005] Phone : (1979)551-4186 Fax Mysber : (1872001-7972]

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danafragakis@email.com

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O: Registration Se Division of Con				
	FAMILY LEG	GAL SERVICES, PLLC		
JBJECT:	Name of Lim	ited Liability Company		
ne enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
ease return all correspo	ondence concerning this matter	to the following:		
		DANA M. FRAGAKIS, ESQ.		ï
	-	Name of Person		
	D	ANA M. FRAOAKIS LAW, PLL	С	
		Plan/Company		
	593	5 PREMIER WAY, UNIT 1455		
		Address		
		NAPLES, FL 34109		
		City/State and Zip Code		
		nafragakis@gmail.com		
	E-mail address: (to be used for future annual report no	tification)	1
or further information c	concerning this matter, please o	all:		
DANA M. I	FRAGAKIS, ESQ.	239 at (552-4138	
Name o	(Person	Area Code Dayti	me Telephone Number	
				•
nclosed is a check for th	he following amount:			į
325.00 Filing Fee	S30.00 Filing Fee &	S55.00 Filing Fee &	☐ \$60.00 Filing Fee, Certificate of Status &	į
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certified Copy (additional copy is enclosed)	1
				i

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT (((H22000214017 3))) TO ARTICLES OF ORGANIZATION OF

	. Services, PLLC		
(Name of the Limited Liability Come) (A Florida Limited	ny as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on	JULY 10, 2018	and assigned
Florida document numberL18000166449			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited list	illty company her	<u>e</u> :	
	AKIS LAW, PLLC		
The new name must be distinguishable and contain the words "Limited Liab	llity Company," the des	ignation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		· · · · · · · · · · · · · · · · · · ·	2(2)
		.:	. 型 F(2)
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			P
			က္
		_	သို့
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our-re	cord s, <u>enter the nam</u>i	of the new registere
Name of New Registered Agent:			·
New Registered Office Address.	Putar Clast	da street address	
	Enter Florit	10 311 001 0000 900	
		, Florida	Zip Code
	City		ay cour

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 or removed from our records:	title, name, and address of each person being added
MGR = Manager AMBR = Authorized Member	(((H22000214017 3)))

Title	Name	Address	Type of Action
			□ Add
			□ Remove
			Change
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			Remove
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E. Effective date, if oth (If an effective date is liste Note: If the date inse document's effective	rted in this blo	ick does not m	cet the appl	icable statutor	ng or more the ry filing requ	(option 90 days after irements, this	nal) filing.) Pursuant o date will not b	o 605.0207 (3)(o fisted as the
f the record specifies a de ecord is filed.	layed effective	date, but not i	an effective	time, at 12:01	a.m. on the	earlier of: (b)	The 90th day	rafter the
		JUNE 21	2022	/				
Dated				/		, ,		

Filing Fee: \$25.00