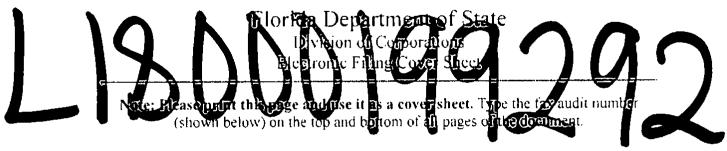
4/2/2021

Division of Corporations



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To:

Division of Corporations

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Fax Number

: (323)962-3889

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Email Address:___

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DOUGLAS & JANELLE DUNCAN PLLC

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From: J og 1 of 8

COVER LETTER

TO: Registration Se Division of Cor			*	•
	& JANELLE DUNCAN PLL			
SUBJECT:	Name of Limi	ted Liability Company		_
	•	•		
	•			
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filling.		•
Please return all correspo	indence concerning this matter	to the following:		
	Chayenne Moseley			
·.		Name of Person		<u> </u>
-	Legalzsom.com, luc.			
		Firm/Company -		
	101 N Brand Blvd 11th Fl			
		Address		
	Glendale, CA 91203			
•		City/State and Zip Code		,
	doug@duncanproductionter	ım.c•m		.; .;
	E-mail address: (to be used for future annual re	port militention)	;
For further information of	concerning this matter, please co	ult:		
Cheyenne Moseley		800 773 at ()	•888	
Name (f Person	Alea Code	Daytime Telephone Num	ber :
Enclosed is a check for t	he following amount:			
□ \$25.0€ Filing Fee	🗅 \$30.00 Filing Fee & Certificate of Status	■ \$55.#0 Filing Fee & Certified Copy		Filing Fee,

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is citclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallanassee, FL 32301

(additional copy is enclosed)

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From: Ja pg 2 of 8

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DOUGLAS & JANELLE DUNCAN PLLC (Name of the Limited Liability Conna (A Florida Limited	iny as it now uppears on our Liability Company)	records.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000199292</u>	were filed on <u>08/20/2018</u>	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ollity company here:		
Douglas Duncan & Janeile Duncan PLLC			
The new name must be distinguishable and contain the words "Limited Liah			
Enter new principal offices address, if applicable:	16197 N 157th Ave	28.2	
(Principal office address MUST BE A STREET ADDRESS)	Surprise, AZ 85374		
		- 1	
		<u> </u>	
Enter new mailing address, if applicable:	16197 N 157th Ave		
(Mailing address MAY BE A POST OFFICE BOX)	Surprise, AZ 85374	10 m	
		.: ^	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent:	<u>re</u> :	ecords, enter the name of the	
New Registered Office Address:			
The state of the s	Enter Florido strea 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

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From: Ja pg 3 of 8

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> AMBR	<u>Name</u> DOUGLAS DUNCAN	Address	Type of Action
AIMOR		والمراجع المراجعة والمراجعة والمراجع	D Add
		pag and a salar a salar and a salar a	☐ Remove
		16197 N 157th Ave Surprise, AZ 85374	☐ Change
AMBR	JANELLE DUNCAN		Add
			□ Remove
		16197 N 157th Ave Surprise, AZ 85374	☐ Change
			□ Add
			□ Remove
			Change
ABS 500			□ Add
			□ Reniove
			☐ Chaufic
		91 Martin V 917 100 (4 Jan 100 100 100 100 100 100 100 100 100 10	☐ Remove
		Appropriate to the second seco	☐ Change
			□ Add
			□ Remove
			☐ Change

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D. If amending ar	y other information, cute	er change(s) here: (Attach additiona	l sheets, if necessary.)	
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E. Effective date,	if other than the date of f	lling:	(optional)	
(If an effective date	is listed, the date must be specific	iling: c and cannot be prior to date of filing or more not meet the applicable statutory filing r	than 90 days after filing.) Pursuant to	605.0207 (3)(b).

If 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 _	$3/25$ $\frac{2021}{}$
	$\mathcal{O}_{\mathcal{O}}$
	Signature of a member or authorized representative of a member
	Douglas Duncan
	Typed er printed name of signee

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Filing Fee: \$25.00