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## **COVER LETTER**

TO:

**Registration Section** 

Division of Cor	porations		
	d Deitsch, PLLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Stephen Deitsch		
		Name of Person	<u> </u>
	Deitsch and Deitsch, PLL	С	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	8333 Bowie Way		
		Address	
	Lake Worth, Fl, 33467		
	dainah Odainah laur	City/State and Zip Code	
	steve.deitsch@deitschlaw.c	to be used for future annual report no	otification)
For further information of	oncerning this matter, please of	eall:	
Stephen Deitsch		561 376-5650 at ()	
Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		<u>Street Address:</u> Registration S	ection
Registration S Division of C		Division of Co	
P.O. Box 632	27	The Centre of	
Tallahassee, I	rl 32314	2410 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Deitsch and Deitsch, PLLC		
( <u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)	
he Articles of Organization for this Limited Liability Comp	pany were filed on February 21, 2019	and assigned
orida document number L19000051401		
is amendment is submitted to amend the following:		
If amending name, enter the new name of the limited	liability company here:	
aimants' Trial Group, PLLC		
e new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or the	abbreviation "L.IC."
nter new principal offices address, if applicable:		25
rincipal office address MUST BE A STREET ADDRESS	5)	
		, pá
		Ö
nter new mailing address, if applicable:		2 平 (5
Aailing address MAY BE A POST OFFICE BOX)		. ,
Taking duaress MAT BE A TOST OFFICE BOAT		1) 01
		<del></del>
If amending the registered agent and/or registered off ent and/or the new registered office address here:	fice address on our records, enter the na	me of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida 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 =	Authorized	Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
			□Add
			Remove
			□Change
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			□Remove
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ective date, if other than	the date of filing:	(	optional)
neffective date is listed, the date  te: If the date inserted in thi	must be specific and cannot be prior to s block does not meet the applicab	date of filing or more than 90 days le statutory filing requirement.	s after filing.) Pursuant to 605.0207 s, this date will not be listed as
cument's effective date on th	e Department of State's records.		
cord specifies a delayed effe is filed.	ctive date, but not an effective tim	e, at 12:01 a.m. on the earlier of	of: (b) The 90th day after the
ar med.			
April 12	2021		
	,	-	
hard	0		
	Signature of a member or authori	zeo representative of a member	
Stephen D. Deitsch			
~ · · · · · · · · · · · · · · · · · · ·	Typed or printed	name of signee	

Filing Fee: \$25.00