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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

: (323)962-3889 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COVER LETTER

TO: Registration Se Division of Cor	ction porations		•	
THE PROP	PER AGENT, LLC	·.	٠.	,
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		• • •
Please return all correspo	ndence concerning this matter	to the following:		
	Cheyenne Moseley			
·	*	Name of Person		
	Legalzoom.com, Inc.	· ·		
•	لينة ماكاك ديكيم لانة كالمحمد كالهروات وماحم ساونان كالأكون ماحمي مناسانيان شاملونيسد 5 شويد	Firu/Company		
·	101 N Brand Blyd 11th Fi			
		Address		
•	Glendale, CA 91203			. •
·		City/State and Zip Code		
	kim.williamson@floridamo			
	E-mail isddress: (to be used for future annual report no	tification)	
For further information of	oncerning this matter, please co	all:		•
Cheyenne Moseley	• •	800 773-0888		
Name o	f Person		ne Telephone Number	
Enclosed is a check for the	e following amount:			
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &
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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

THE PROPER AGENT, LLC

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company (A Florida Limited Lia	as it now appear bility Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Company w	ere filed on 02	1/28/2019	and	l assigned
Florida document number L19000059059				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability	ty company h	ere:		
Kim M Williamson, LLC		•		
The new name must be distinguishable and contain the words "Limited Liability	Company," the c	lesignation "LLC" (or the abbreviation	1"L.L.C."
Enter new principal offices address, if applicable:			·	•
(Principal office address MUST BE A STREET ADDRESS)				
			. ≥∽	202
· .	•	•		J 10
Enter new mailing address, if applicable:		· ·		
(Mailing address MAY BE A POST OFFICE BOX)			- 1	00 1
			<u>.</u>	至、门
	,		\$5	ਕ਼ U
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address or	our records,	enter the nar	ne of the ne
			•	
Name of New Registered Agent:				
No. 10-11-11-11-1000-1-1-1-1-1-1-1-1-1-1-1-		•	•	
New Registered Office Address:	Enter Flo	rida street address		
	City	, Flor	ida	ode :
New Registered Agent's Signature, if changing Registered Agent:			,	
THE SPECIAL PROPERTY OF THE PR				

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

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

MGR = Mi AMBR = At	nnager uthorized Member		
<u>l'itle</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
			Change
			D Add.
			Remove
			☐ Change
•			D Add
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