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Brant M. Dorsey

Retired: J. Michael Jerry

Gregory B. Conway 1944-2017 (Founder)

Law Firm of CONWAY, OLEJNICZAK & JERRY, S.C. Telephone: (920) 437-0476

Since 1976

Facsimile: (920) 437-2868

sarahl@lcojlaw.com

www.lcojlaw.com

February 13, 2020

Florida Department of State Attn: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re:

Informed Decision LLC

Document No. L19000162133

Dear Sir or Madam:

Enclosed please find an original Articles of Amendment to Articles of Organization along with our firm cheek in the sum of \$30.00 for filing fee and Certificate of Status fee.

Please do not hesitate to contact me should you have any questions or concerns.

Very truly yours.

LAW FIRM OF CONWAY, OLEJNICZAK & JERRY, S.C.

SML:sml Enclosure 3329178

COVER LETTER

| | egistration Se ivision of Cor | | | | |
|-------------|--|--|---|--|--|
| era men | | ecision LLC | | | |
| SUBJECT | : | Name of Lin | nited Liability Company | | |
| The englose | ad Articles at | Amendment and fee(s) are sub | ancitral for filing | FOR BOARD STATE OF THE STATE OF | |
| | | ndence concerning this matter | • | | |
| | | Sarah Leupold | | | |
| | | - | Name of Person | <u> </u> | |
| | | Law Firm of Conway, Old | jniezak & Jerry, S.C. | | |
| | | | Firm/Company | | |
| | | P.O. Box 23200 | D. Box 23200 | | |
| | | | | | |
| | | Green Bay, WI 54305-320 | Ю | | |
| | | | City/State and Zip Code | | |
| | | E-mail address: (| to be used for future annual report notific | cation) | |
| For further | information co | oncerning this matter, please c | all: | | |
| Sarah Leup | oold | | 920 437-0476 | | |
| | Name of | Person | at () Area Code Daytime | 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) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) | |
| Ro | ailing Address egistration S ivision of Co | ection | Street Address: Registration Sect | | |
| | O. Box 6327 | | Division of Corp The Centre of Ta | | |

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| | T CICLES OF (| AMENDMENT O ORGANIZATION OF | P | d d |
|---|--|--|------------------------------|---------------|
| Informed Decision LLC | | | | De . |
| (Numy of the Lim | ted Llability Comp (A Florida Limited | nny as It now appears an our r Liability Company) | ecords.) | 1/2 3/4 |
| The Articles of Organization for this Limited I Florida document number L19000162133 | iability Company | were filed on June 19, 201 | and assigne | d G |
| This amendment is submitted to amend the fol | lowing: | | | |
| A. If amending name, enter the new name of | of the fimited liab | dilty company here: | | |
| | | | | |
| The new name must be distinguishable and contain the | words "Limited Liabi | | | • |
| Enter new principal offices address, if applie | cable: | 2595 Development Drive | , Suite 100 | - |
| (Principal office address MUST BE A STREE | ET ADDRESS) | Green Bay, WI 54311 | | |
| | | | | |
| Enter new mailing address, if applicable: | | 2595 Development Drive | , Suite 100 | |
| (Mailing address MAY BE A POST OFFICE | BOX) | Green Bay, WI 54311 | | |
| | | | | |
| B. If amending the registered agent and/or and/or the new registered office addre | registered office a ss here: | ıddress on our records, <u>e</u> | nter the name of the new reg | istered |
| Name of New Registered Agent: | Incorp Services | , Inc. | | |
| New Registered Office Address: | 17888 67th Cou | | | |
| | | Enter Florida street a | | |
| | Loxahatchee | City | , Florida 33470 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.

Isabel Burgos on behalf of Incorp Services, Inc.

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> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|-----------------|-----------------------|----------------|
| MGR | Brian Schroeder | 2064 Allouez Avenue | ■Add |
| | | Green Bay, WI 54311 | |
| | | | □Change |
| MGR | Shawn Schroeder | 13620 Metropolis Ave. | |
| | | Fort Myers, FL 33912 | |
| | | | □Change |
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| m effective da o <mark>te:</mark> If the d | e, if other than the date are is listed, the date must be spe late inserted in this block do Tective date on the Departm | ecific and cannot be prior to ses not meet the applica | ble statutory filing rec | quirements, this date wil | |
| | fies a delayed effective date. | , but not an effective tin | ne. at 12:01 a.m. on ti | ne earlier of: (b) The 90 | Oth day after the |
| ecord specifis filed. | | | | | |
| is filed. | February 4 | 2020 | | | |
| is filed. | <i>3</i> / > | | _· | | |
| is filed. | <i>3</i> / > | | · | member | |

Filing Fee: \$25.00