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V SULKER
JAN 3 1 2020

COVER LETTER

	gistration Sec vision of Corp				
CUDIECE.	Linda Danie	els. LLC.	•		
SUBJECT:		Name of Lim	ned Liability Company		
The enclosed	f Articles of .	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Zachary R. Roth			
			Name of Person		
		Ansbacher Law, P.A.			
			Firm/Company		
		8818 Goodbys Executive I	Drive		
			Address		
		Jacksonville, Florida 3221	7		
			City/State and Zip Code	<u></u>	
		ldaniels@lindadaniels.com;	Zachary.Roth@ansbacher. to be used for future annual re		
For further i	nformation c	oncerning this matter, please c		•	
Linda Danie	els		904 304- at ()	7222	
	Name o	f Person	Area Code	Daytime Telepho	ne Number
Enclosed is	a check for th	ne following amount:			
■ \$25.00 l	Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo		S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Ma	iling Addres	s;	Street Ade	dress:	

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Linda Daniels, LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on September 24, 2019	and assigned
Florida document number L19000241032		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
Linda Daniels & Associates, LLC.		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the	abbreviation "L.L.C." -
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		2020 TAIL
		70 E T
		53 -
B. If amending the registered agent and/or registered office	address on our records, enter the na	me of the new registered
agent and/or the new registered office address here:	address on our records, enter the ha	M 2 1
		F(0)
Name of New Devictored Access		924 o
Name of New Registered Agent:		P
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:

Type of Action
□Remove
Change
□Add
□Remove
Change
□Remove
□Change
□ Add
□Remove
□Change
□Add
□Remove
□Add
□Remove

				
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fective date, if other than the date of the date is listed, the date must be stee: If the date inserted in this block is current's effective date on the Department's effective date on the Department.	k does not meet the appi	icable statutory tiling	(option ore than 90 days after fil requirements, this d	al) ing.) Pursuant to 605.020' ate will not be listed as
ecord specifies a delayed effective d is filed.	late, but not an effective	time, at 12:01 a.m. o	n the earlier of: (b)	The 90th day after the
January 2.	2020			
ted				
Hilda Da	ull	thorized representative	of a member	

Filing Fee: \$25.00