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COVER LETTER

TO:

Tallahassee, FL 32314

	istration Se ision of Cor						
SUBJECT:	Conroy Law, PLLC						
SUBJECT:		Name of Limited 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:				
		Evan E. Conroy					
	Name of Person						
		Conroy Law, PLLC					
Firm/Company 5745 SW 75th Street, #247							
		Gainesville. Florida 32608					
			City/State and Zip Code				
		econroy@theconroylaw.cor	n to be used for future annual report n	otification)			
For further in	iformation c	oncerning this matter, please c	·				
Evan E. Conroy			352 648-9757				
Name of Person			at () Area Code Dayt	ime Telephone Number			
Enclosed is a	check for th	ne following amount:					
■ \$25.00 F	iling 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)			
	ling Addres		Street Address:				
Registration Section Division of Corporations			Registration Section Division of Corporations				
P.O. Box 6327			The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Conroy Law, PLLC

(<u>Name of the Limited Lia</u> (A Flo	ability Compa orida Limited I	ny as it now appears on our records. liability Company)	48E 1	
The Articles of Organization for this Limited Liabilit Florida document number <u>L19000245294</u>	y Company	were filed on September 30, 201	9 Eand assigned	
This amendment is submitted to amend the following	<u>7</u> .			
A. If amending name, enter the new name of the	limited liabi	lity company here:		
The new name must be distinguishable and contain the words "	Limited Liabil	ity Company," the designation "LLC"	or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	11 N.W. 33rd Crt., Ste. 103			
(Principal office address MUST BE A STREET ADDRESS)		Gainesville, Florida 32607		
Enter new mailing address, if applicable:		5745 SW 75th Street, #247 Gainesville, Florida 32608		
(Mailing address MAY BE A POST OFFICE BOX)	<u>)</u>			
B. If amending the registered agent and/or registe agent and/or the new registered office address her	ered office a re:	ddress on our records, <u>enter t</u>	he name of the new registered	
Name of New Registered Agent: Ev	,			
New Registered Office Address:	N.W. 33rd C			
	Enter Florida street address			
Ga	iinesville	, Flor	rida <u>32607</u>	
Non-Bookstand Assath Cincolner of Assath		City	Zip Code	
New Registered Agent's Signature, if changing Regist	ered 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	Address	Type of Action
			□Add
			□Remove
			□Change
			Remove
			🗆 Add
			□Remove
			Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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 _ July 28 2020 Signature of a member or authorized representative of a member Evan E. Conroy, Authorized Member Typed or printed name of signee

Filing Fee: \$25.00