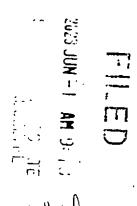


	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions	s to Filing Officer:	





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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registratio Division of	n Section Corporations		
CLE CEN. E ET ACTORS	N M. FOLBERG, CPA. CGMA, N	1BA, ED.D, PLLC	
SUBJECT:	Name of Lim	ited Liability Company	<u>.</u>
The enclosed Article	s of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	espondence concerning this matter	to the following:	
	Shawn M. Folberg, CPA		
		Name of Person	
	CPA Tax Adviser, PLLC		
		Firm/Company	
	12121 Little Rd. #257		
	 	Address	
	Hudson, FL 34667		
		City/State and Zip Code	
	admin@procpa.net		
For further information	E-mail address: (on concerning this matter, please c	to be used for future annual report n	otification)
Shawn M. Folberg	and conserving the manner, produce of	727 753-9433	
	cn .	at ()	
Nar	ne of Person	Area Code Dayt	ime Telephone Number
Enclosed is a check f	or the following amount:		
□ \$25.00 Filing Fe	e S30.00 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 Add		Street Address:	Sanat au
Registration of Division of Control	of Corporations	Registration S Division of C	
P.O. Boy	•	The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SHAWN M. FOLBERG, CPA, CGMA, MBA. E		ounds V
(Name of the Limited Liability Co	ompany as it now appears on our reconted Liability Company)	(OLUS.)
The Articles of Organization for this Limited Liability Comp	pany were filed on 01/23/2020	and assigned
Florida document number L20000029384		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
CPA Tax Adviser, PLLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "I	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES.	<u>S)</u>	
		/a 13
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)	 	
	 	3
	·	
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	lice address on our records, <u>en</u>	ter the name of the new regist
		ni 🤼
Name of New Registered Agent:		
Name Bandarana d OO aan Addarana		
New Registered Office Address:	Enter Florida street add	dress
		. Florida

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	Address	Type of Action
			□Add
			□Remove
		<u> </u>	Change
			□Add
			□Remove
		-	Change
			□ Add
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Tective date, if other than the date on effective date is listed, the date must be spote: If the date inserted in this block do necessary of the personal of t	ecific and cannot books not meet the	be prior to da applicable			s after filing.)		
cument's effective date on the Departn	nent of State's re	ecoras.					
ecord specifies a delayed effective date, is filed.	, but not an effec	ctive time,	at 12:01 a.m. c	on the earlier o	of: (b) The	90th day after	the
May 30th	2023						
Than M. Folgo	<u>{</u>	and the same	1	a Ca marib		· - · · · ·	
S1 50 01	ture of a member of	or aumorized	a representative	or a member			
Shawn M. Folberg							

Filing Fee: \$25.00