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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : M. FAEHNER, ESQ. LLC

Account Number : I20170000081 Phone : (727)443-5190

Fax Number : (727)474-9949

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

Email Address:\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KAYLA RUTKOSKI PLLC

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## **COVER LETTER**

TO: Registration Sec Division of Corp			
Knyla Ruike	oski PLLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub	nitted for filing.	
Please return all correspo	ndence concerning this matter t	to the following:	
	Michael J. Faehner		
		Name of Person	
	Fachner PLLC		
		Firm/Company	····
	600 Bypass Drive, Suite 10	00	
		Address	· · · · · · · · · · · · · · · · · · ·
	Clearwater, FL 33764		
	·	. City/State and Zip Code	
	filings@mfachner.com		
	E-mail address: (	to be used for future annual report noti	lication)
For further information c	oncerning this matter, please ca	all:	
Michael J. Faehner		727 443-5190 at ( )	
Name o	f Person	Area Code Daytim	e Tekphone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration		Street Address: Registration Se	ction
Division of C	Corporations	Division of Cor	rporations
P.O. Box 632	27	The Centre of I	lallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kayla Rutkoski PLLC		
(Name of the Limited Linbility Co	ompany as it now appears on our recornited Liability Company)	<u>ds.</u> )
The Articles of Organization for this Limited Liability Comp.  Florida document number L20000039954		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
Kayla Rutkoski, DO PLLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "Ll.	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	55)	
		20 EC
		EB 71
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		71 <b>35</b> (77)
(Mulling address MAT BE A TOST OF TICE BOA)		
		Ê, c
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, <u>ent</u>	er the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	ress
		Florida
<del></del>	Сііу	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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			Remove
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document's effective da	e on the Departmen	it of State's records.	, ,		
record specifies a delay	ed effective date, bu	ut not an effective tim	ie, at 12:01 a.m. on the	earlier of: (b) The 90th day	after the
d is filed.					
Dated		2020	_ :		
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