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## **COVER LETTER**

Registration Section

TO:

Division of Corp	orations				
LAW OFFIC	E OF J. ALLEN FORETICE	I, JR., PLLC			
	Name of Lim	ited Liability Company			
WI 1 14 2 1 CA					
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please return all correspon	dence concerning this matter	to the following:			
	J. ALLEN FORETICH, JE	₹.			
		Name of Person			
		Firm/Company			
	P.O. BOX 460273	i uni Company			
		Address		<del>-</del>	
	FÖRT LAUDERDALE, F	L 33316			:
	ALLEN@FORETICHLAW	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·		
	<del>-</del>	to be used for future annual	report notification)	<del></del> _	<del>-</del> -
For further information co	ncerning this matter, please c		•	1	. <del>.</del>
J. ALLEN FORETICH, J	₹.		4-833-3000		 ప్
Name of	Person	at () Area Code	Daytime Telephone Nu	mber	
Enclosed is a check for the	following amount:				
\$\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enc	· Cert losed) Cert	00 Filling Fee, dificate of Stat ified Copy tional copy is en	dus &
Mailing Address: Registration So Division of Co	ection	_	ddress: ation Section n of Corporations		
P.O. Box 6327			ntre of Tallahassee		
Tallahassee, Fl	L 32314	2415 N	. Monroe Street, Sui	ite 810	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LAW OFFICE OF J. ALLEN FORETICH, JR., PLLC

( <u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability ComFlorida document number $\frac{1.20000066347}{1.20000066347}$ .	pany were filed on 2/28/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
FORETICH LAW, PLLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		· ·
(Principal office address MUST BE A STREET ADDRES		
Enter new mailing address, if applicable:	P.O. Box 460273	: : : : : : : : : : : : : : : : : : :
(Mailing address MAY BE A POST OFFICE BOX)	Fort Lauderdale, FL 33316	·
B. If amending the registered agent and/or registered of	fice address on our records, enter the	name of the new regist
agent and/or the new registered office address here:		
Name of New Registered Agent:	<del></del>	
New Registered Office Address:		
	Enter Florida street address	
·	, Florid	a
	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 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>	Address	Type of Action
		···	□Add
			□Remove
			☐ Change
			□Add
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<del></del>	<del></del>	<del></del>	□Add
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ffective date, if other than the date of filing:  'an effective date is listed, the date must be specific and cannot be prior to date listed. If the date inserted in this block does not meet the applicable socument's effective date on the Department of State's records.	(optional) e of filing or more than 90 days after filing.) Pursuant to 605.020
record specifies a delayed effective date, but not an effective time, all is filed.	t 12:01 a.m. on the earlier of: (b) The 90th day after the
May 14, 2024	
Dated	
1/4/	

Filing Fee: \$25.00

Typed or printed name of signee