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August 10, 2020

FLORIDA DEPARTMENT OF STATE Division of Corporations

VELEZ LEGAL PRACTICE, LLC PO BOX 771044 WINTER GARDEN, FL 34777US

SUBJECT: VELEZ LEGAL PRACTICE, LLC REF: L20000122608

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The specific purpose of the entity must be set forth in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker Regulatory Specialist III

FAX Aud. #: H20000268979 Letter Number: 420A00015041

P.O BOX 6327 - Tallahassee, Florida 32314

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VELEZ LEGAL PRACTICE, LLC			
(Name of the Limited Liability ((A Florida Li	Company as it now appears on our rec- imited Liability Company)	ords.)	
The Articles of Organization for this Limited Liability Con	npany were filed on	and assigned	
Florida document number L20000122608			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company here:		
VELEZ LEGAL PRACTICE, PLLC			
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "L	LC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE.	<u>(22</u>		
	······		
Enter new mailing address, if applicable:	- <u></u>	6703	
(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·	
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B. If amending the registered agent and/or registered o	office address on our records, <u>ent</u>	ter the name of the new registered	
agent and/or the new registered office address here:		<u>ب</u> بې ا	
		C.	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street ado	dress	
	, Florida		
	Cny ,	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

Title	Name	Address	Type of Action
			🖸 Add
			🗆 Remove
			Change
			🗆 Add
			🗆 Remove
			🗆 Change
			🗆 Add
			CRemove
			🖾 Change
			🗆 Add
			🗋 Remove
			🗆 Change
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			Change
			🖸 Add
			Remove
			Change

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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) <u>Note:</u> 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.

August 7th Dated	2020	
	·································	
	Signature of a member or authorized representative of a member	

Saray Djidji, Attorney-in-Fact

Typed or printed name of signee