## L20 000 123688

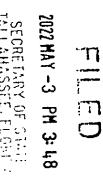
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## FLORIDA DEPARTMENT OF STATE Division of Corporations TALL MANAGEMENT TA

April 15, 2022

**COURTNEY WALTERS** 1776 POLK STREET **UNIT 1206** HOLLYWOOD, FL 33020 US

SUBJECT: CW LEGAL, PLLC Ref. Number: L20000123688

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must be signed by a member or an authorized representative of a member.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Jasmine N Horne Regulatory Specialist II

Letter Number: 622A00008860

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

CW Legal, PLLC

2022 MAY -3 PM 3: 48

(Name of the Limited Liability Compa (A Florida Limited l	ny as it now appears on our records.) Liability Company) SECRETAR TALLAHASS	Y OF STATE FE. PLOWER.
The Articles of Organization for this Limited Liability Company L20000123688  Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The Law Office of Cortney E. Walters, PLLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	2719 Hollywood Blvd., Suite A-1969	
(Principal office address MUST BE A STREET ADDRESS)	Hollywood, FL 33020	
Enter new mailing address, if applicable:	2719 Hollywood Blvd., Suite A-1969	
(Mailing address MAY BE A POST OFFICE BOX)	Hollywood, FL 33020	
B. If amending the registered agent and/or registered office a	address on our records, enter the nam	
agent and/or the new registered office address here:		or me new regime.
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address , Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agroporovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pleing filed to merely reflect a change in the registered office	performance of my duties, and I am forovided for in Chapter 605, F.S. Or,	amiliar with and if this document

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>	<u>Name</u>	<u>Address</u>	Type of Action
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
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. If ar	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an <b>Not</b> e	effective date, if other than the date of filing:
	cord 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 filed.
Date	ed
	HAMA AMBR
	Signature of a member or authorized representative of a member
	Archaul IIIa Hara
	Cortney Walters Type or printed name of signee