LZO 000144230

(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phon	e #)
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(Do	ocument Number)	
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COVER LETTER

TO:	Registration So Division of Con		•	
CHDIE		ICES OF ELYSA GALLOWA	Y.LLC •	
SUBJEC	٠١ <u>-</u>	Name of Lin	nited Liability Company	
The encl	osed Anicles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		ELYSA N. GALLOWAY		
			Name of Person	
		LAW OFFICES OF ELYS	SA GALLOWAY, LLC	
			Firm/Company	
		P.O. BOX 5016		
			Address	
		LIGHTHOUSE POINT, F	1.33074	
		GALLOWAYATLAW@GN		
		E-mail address: (to be used for future annual report noti-	fication)
For furth	er information co	oncerning this matter, please c	all:	
HYSA	N. GAŁLOWAY		754 214-1456 at ()	
_	Name of	Person	Area Code Daytime	e Telephone Number
Enclosed	is a check for th	e following amount:		
≅ \$25.0	00 Filing Fee	☐ \$30,00 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)
•	Mailina Addan		Common Addition	

Mailing Address:
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



January 26, 2021

ELYSA N. GALLOWAY P.O. BOX 5016 LIGHTHOUSE POINT, FL 33074

SUBJECT: LAW OFFICES OF ELYSA GALLOWAY, LLC

Ref. Number: L20000144230

We have received your document for LAW OFFICES OF ELYSA GALLOWAY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Irene Albritton Regulatory Specialist II

Letter Number: 121A00001727

RECEIVED

COVER LETTER

10: I	Registration Se Division of Cor	cuon porations	•	
		CES OF ELYSA GALLOWAY	LLC •	
SUBJEC	Т:	Name of Lim	ited Liability Company	
The enclo	sed Anicles of	Amendment and fec(s) are sub	mitted for filing.	
Please ret	um all correspo	ndence concerning this matter	to the following:	
		ELYSA N. GALLOWAY		
			Name of Person	
		LAW OFFICES OF ELYS	A GALLOWAY, LLC	
			Firm/Company	
		P.O. BOX 5016		
		· · · · · · · · · · · · · · · · · · ·	Address	
		LIGHTHOUSE POINT, F	L 33074	
		GALLOWAYATLAW@GN	City/State and Zip Code IAIL.COM	
		E-mail address: (to be used for future annual report notif	ication)
For furthe	r information co	oncerning this matter, please ca	all:	
ELYSAN	i. Galloway		754 214-1456	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed	is a check for th	e following amount:		
\$25.0	0 Filing Fee	□ \$30.00 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 Address Registration S		Street Address: Registration Sec	tion
	Division of Co		Division of Corp	

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LAW OFFICES OF ELYSA GALLOWAY, LLC

1 1 1 1 5 5 52

(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on our reconted Liability Company)	ords.)
The Articles of Organization for this Limited Liability Complete Liabi	pany were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
LAW OFFICES OF ELYSA GALLOWAY, PLLC		
The new name must be distinguishable and contain the words "Limited	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 ADDRES.	S)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. BOX 5016 LIGHTHOUSE POINT, FL	33074
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our records, <u>ent</u>	er the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addi	ress
	, I	Florida
	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 =	Managèr'	
AMBR =	= Authorized Member	•

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Changa

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) LAM REQUESTING TO AMEND ENTITY NAME FROM: LAW OFFICES OF ELYSA GALLOWAY, LLC
TO: LAW OFFICES OF ELYSA GALLOWAY, PLLC
(ATTACHED IS MY MEMBER PROFILE FROM FLORIDA BAR IF NEEDED FOR PLLC)
I WOULD ALSO LIKE TO REMOVE PHYSICAL ADRESS AND ONLY HAVE MAILING ADRESS LISTED
AS: P.O. BOX 5016, LIGHTHOUSE POINT, FL 33074
IF ALLOWED TO REMOVE POHYSICAL ADDRESS IF NOT PLEASE JUST ADD MAILING ADDRESS.
THANK YOU.
Specific purpose of entirys is a
Law FIRM ,
the practice of law as a licensec
professional, aftorney in the Stake
0f F108ida:
PLIC IS SPRUFIC for professionals;
such as lawyers as orrowed to an
ilc.
E. Effective date, if other than the date of filing:
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.
Dated
Signature of a member or authorized representative of a member
Typed or privad name of signee