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COVER LETTER

TO:	Registration Se Division of Cor				
SUBJE		S, WALD & GARNER, PLLC			
SUBJE	C1.	Name of Lim	ited Liability Company		
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please r	eturn all correspo	ndence concerning this matter	to the following:		
		MARGARET E. GARNER	₹		
			Name of Person		
	KATRANIS. WALD & GARNER, PLLC				
	Firm/Company				
	501 EAST LAS OLAS BLVD, STE 200/300				
Address					
	FORT LAUDERDALE, FL 33301				
	City/State and Zip Code				
		SERVICE@KWGLEGAL.			
For furth	ner information co	oncerning this matter, please or	to be used for future annual report notificall:	атоп)	
	ARET E. GARNI		at (7-54) 231-8	107	
	Name of	Person	Area Code Daytime	Telephone Number	
Enclosed	l is a check for th	e following amount:			
X \$25	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address Registration S		Street Address: Registration Secti	ion	

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

.

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1.080 - 217:17

KATRANIS, WALD & GARNER, PLLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Co	mpany were tiled on $\frac{09/08/20}{}$	20 and assigned
Florida document number L20000279589	_·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designa	ion "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our record	s, <u>enter the name of the new registerec</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	and cold linearing
	imer i forga sa	
	City	, Florida
New Registered Agent's Signature, if changing Registered	·	
I hereby accept the appointment as registered agent as provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	nd agree to act in this capac mplete performance of my d ent as provided for in Chapt	uties, and I am familiar with and er 605, F.S. Or, if this document is
	If Changing Registered Agent, Si	gnature 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>	Address 20 111- 11. 7: 17	Type of Action
MGR	MARGARET E. GARNER	501 East Las Olas Blvd.	= Add
		Suite 200/300	□Remove
		Fort Lauderdale, FL 33301	□ Change
			□Add
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Effective date, if other than the	date of filing:	(0)	otional)
f an effective date is listed, the date mus Note: If the date inserted in this blo	t be specific and cannot be prior to date o ock does not meet the applicable state	of filing or more than 90 days a	fter filing.) Pursuant to 605.0207 (this date will not be listed as the
document's effective date on the De		tutory trinig requirements.	ums date will not be fisted as a
	e date, but not an effective time, at 1	2:01 a.m. on the earlier of:	(b) The 90th day after the
rd is filed.			
October 23	2020		
October 23 Dated			
		_	
	Signature of a member or authorized re	presentative of a member	
Thomas A. Katranis, II			
	Typed or printed name	of signee	

Filing Fee: \$25.00