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1		INC.		st 6th Avenue. Tallahassee, Florida 32303 (066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-16	566
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2.		(CORPORATE NAM	4E AND DOCUMENT #)		
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COVER LETTER

SUBJECT: ALDONY	'A LAW OFFICES, LLC	i
3000te1.	DISSION of Corporations DISSICCT: ALDONYA LAW OFFICES.LLC Name of Limited Liability Company ne enclosed Articles of Amendment and feets) are submitted for filling, ease return all correspondence concerning this matter to the following: DONYA R. ALKHAFIB	
The enclosed Articles of		
Please return all corresp	ondence concerning this matter	to the following:
	DONYA R. ALKHATIB	
		Name of Person
	ALDONYA LAW OFFICI	ES, LLC
		Firm/Company
	46 Island Estates Pkwy	
		Address
	Palm Coast, FL 32137	
	ALDONYALAW@GMAII	
For further information	concerning this matter, please c	all:
DONYA R. ALKHATIE	3	at (386) 237-7002
Name (of Person	Area Code Daytime Telephone Number
Enclosed is a check for t	he following amount:	
■ \$25.00 Filing Fee		Certified Copy Certificate of Status & Certified Copy Certified Copy
<u>Mailing Addre</u>	<u>ss:</u>	Street Address:
Registration	Section	Registration Section
		•
Tallahassee.	FL 32314	

ARTICLES OF AMENDMENT

ARTICLES OF ORGANIZATION 2021 APR -7 AM 10: 22

ALDONYA LAW OFFICES, LLC					
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our records.) rida Limited Liability Company)				
The Articles of Organization for this Limited Liabilit Florida document number	y Company were filed on October 20, 2020 and assigned				
This amendment is submitted to amend the following					
A. If amending name, enter the new name of the	imited liability company here:				
ALDONYA LAW OFFICES, 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 affices address, if analicable	712 S OCEAN SHORE BLVD				
nter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) FLAGLER BEACH, FL 32136					
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX,					
B. If amending the registered agent and/or register agent and/or the new registered office address her	red office address on our records, enter the name of the new registere				
agent and/or the new registered office doubless ner	<u>-</u>				
Name of New Registered Agent:					
New Registered Office Address: 71	2 S OCEAN SHORE BLVD				
	Enter Florida street address				
FL	AGLER BEACH				
	City Zip Code				

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registored 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. Thereby 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 = Ma $AMBR = Au$	inager ithorized Meinber	ZÖZI ÁFR - 7 AF	
<u>Title</u>	<u>Name</u>	Address	10: 22 Type of Action
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