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Division of Corporations

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JERRY CIONCIPLLC

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Help

COVER LETTER

	istration Sec ision of Corp			
SUBJECT:	JERRY CIO			
SOBJECT.		Name of Limit	ed Liability Company	
The enclosed	Articles of /	Amendment and fee(s) are subm	nitted for filing.	
Please return	all correspor	ndence concerning this matter to	o the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm/Company	
		101 N Brand Blvd 11th Fl		
			Address	
		Glendale, CA 91203		
			City/State and Zip Code	
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For further in	nformation ce	oncerning this matter, please cal	H:	
Cheyenne M	loseley		800 773-0888	
	Name of	Person	at () Area Code Daytim	ne Telephone Number
Enclosed is a	check for th	e following amount:		
□ \$25.00 F	iting Fee	S30.00 Fiting Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fec. Certificate of Status & Certified Copy (additional copy is enclosed)

MAHLING ADDRESS: Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

To. -18506176383 '

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JERRY CIONCIPLLC		
(Name of the Limited Liability Comp (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compar Florida document number 1.21000189838	ny were filed on <u>04/23/2021</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	sbility company here:	
Gerald T. Cionci II PLLC		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
ry re	office address on our records onter	the name of the new
B. If amending the registered agent and/or registered registered agent and/or the new registered office address had a second agent.		
registered again and/or the new registered write with the		2#21 (A.)
Name of New Registered Agent:		2 2
		- No. 12
New Registered Office Address:	Enter Florida street address	
		4 2 17
	Florida	<u> </u>
	·	<u> </u>
New Registered Agent's Signature, if changing Registered Agen	<u>u:</u>	- W
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	te performance of my duties, and I am s provided for in Chapter 605, F.S. Or	familiar with and , if this document is

If Changing Registered Agent, Signature of New Registered Agent

To: +18506176383

MGR = Manager

AMBR = Authorized Member

Page: 5 of 6

2021-08-18 09:51:37 PDT

LegalZoom.com, Inc.

From: Janet Koh

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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

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