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	egistration So ivision of Cor			
		Victor Paralegal Services LLC	•	
SUBJECT	·	Name of Lim	ited Liability Company	<u>, </u>
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retui	rn all correspo	ondence concerning this matter	to the following:	
		Jenny Victor		
		**************************************	Name of Person	
i			Firm/Company	
		18123 Birdwater Dr		
		Tampa Fl 33647	Address	
		jnnyvictor@yahoo.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	lication)
For further	information c	oncerning this matter, please ca	all:	
Jenny Vic	tor		813 8178584	
1	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is	a check for th	ne following amount:		
□ \$ 25.00	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 enclo
! !				
Mailing Address:		Street Address: Registration Sec	stion	
Registration Section Division of Corporations			Registration Section Division of Corporations	
P.O. Box 6327		The Centre of T	The Centre of Tallahassee	
P	Tallahassee Fl 32314		i ne Centre Of 13	สมสมาสภาพย

Tallahassee, FL 32303

·ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Victor & Victor Paralegal Services LLC (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 Company 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: Victor & Victor Legal Document Services LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 = AMBR =	Manager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	<u></u>		□Add
			□ Remove
		,	☐ Change
		<u> </u>	□Add
			□Remove
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, <u>, , , , , , , , , , , , , , , , , , </u>			□ Add
			□ Remove
			□Change
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Please update EIN number New EIN number: 87-0948763 Document Attached. 05/25/2021 E. Effective date, if other than the date of filing: (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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. June 2nd 2021 Dated Signature of a member or authorized representative of a member Typed or printed name of signee