

L21000296643

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

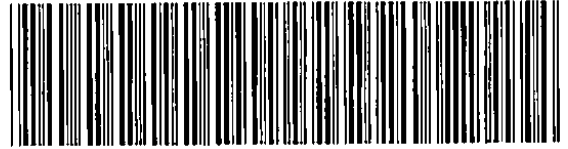
(Document Number)

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DIRECTOR'S OFFICE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2023 FEB - 3 PM 2:40

2023 FEB - 3 PM 2:55

A. BUTLER

FEB - 3 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KE LAW GROUP, PLLC
Name of Limited Liability Company

I enclose Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JENNIFER KILINSKI
Name of Person

KILINSKI/VAN NYK PLLC
Firm/Company

2016 DELTA BLVD., SUITE 101
Address

TALLAHASSEE, FL 32303
City/State and Zip Code

JENNIFER@cddlawyers.com
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

JENNIFER KILINSKI at (850) 508 2335
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 enclosed)

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

2023 FEB -3 PM 2:5

KE LAW GROUP, 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 Company were filed on JUNE 27, 2021 and assigned Florida document number L21000296643.

This amendment is submitted to amend the following:

a. If amending name, enter the new name of the limited liability company here:

KILINSKI | VAN WYK 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 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

_____, 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 Changing Registered Agent, Signature of New Registered Agent

IGR = Manager
AMBR = Authorized Member

AA MBR = Authorized Member

AMBR	JERE L. EARLYWINE	2016 DELTA BLVD.	<input type="checkbox"/> Add
		SUITE 101	<input checked="" type="checkbox"/> Remove
		TALLAHASSEE, FL 32303	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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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.

Dated JANUARY 29 2023

Signature of a member or author

Signature of a member or authorized representative of a member

Roy Van Wyk
Typed or printed name

Typed or printed name of signee

Filing Fee: \$25.00