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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: The Law Office of Catistic Bussell, Name of Limited Liability Company
PUCC
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Latisha Bussell
Name of Person Name of Person Pulson Firm/Company
3525 Mathesan Ave
City/State and Zip Code Cotoo Moul 3 E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Latisha Rossell at (601) 770 8205
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S30.00 Filing Fee SCertificate of Status Certified Copy (additional copy is enclosed) S30.00 Filing Fee SCErtified Copy (cadditional copy is enclosed) S60.00 Filing Fee SCErtified Copy (cadditional 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

The Law Office of La- (Name of the Limited Liability Compa (A Florida Limited)	fisha Russell, Pluc any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L21</u> 003080	were filed on $\frac{7/6/2021}{6}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
The new name must be distinguishable and contain the words "Limited Liabi Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	lity Company." the designation "L.C." or the abbreviation "L.C." 100 S. Biscayne BLVD Suite 300 Miami, FL 33131
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3525 Matheson Ave Miami, FC 33133
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new register
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.

Citv

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		Manager Authorized Member						
	<u>Title</u>	<u>Name</u>		<u>Address</u>			Type of Action	
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				Miami,	fc 3	25133) □Remove	
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