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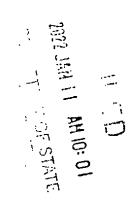
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FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

2022 JAN 10 PM 3: 15

SECRETARY OF STATE

December 28, 2021

APRIL R MARTINDALE 7771 W OAKLAND PARK BLVD SUITE 162 SUNRISE, FL 33351

SUBJECT: MARTINDALE BILLINGS INJURY LAW, PLLC

Ref. Number: L21000482773

We have received your document for MARTINDALE BILLINGS INJURY LAW, PLLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 221A00031177

Alecia Rivers Regulatory Specialist II

www.sunbiz.org

COVER LETTER

Tallahassee, FL 32314

| TO: Registration So Division of Cor | | | |
|--|---|---|---|
| SUBJECT: | M 25tin 221c Bi | Illings Injury har | 1 |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for tiling. | |
| Please return all correspo | indence concerning this matter | to the following: | |
| | April R. Mar | Name of Person | |
| | Mart. 12210 | L24, PLLC Firm/Company | |
| | 7771 W. Oak | 12 nd Park Bldd., su | (tc. 162 |
| | | 3_3_35) City/State and Zip Code | |
| | E-mart address: | to be used for future annual report not | rication) |
| For further information c | oncerning this matter, please co | all: | |
| April R. Mare | tindale, Esq. | at (<u>954</u>) <u>636 · (</u> Area Code Daytim | a 3 3 0 ne Telephone Number |
| Enclosed is a check for t | he following amount: | | |
| ★i \$25.00 Filmg Fee | [7] \$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) |
| <u>Mailing Addres</u> Registration | | <u>Street Address:</u> Registration Se | ction |
| Division of C P.O. Box 632 | lorporations | Division of Cor The Centre of T | • |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on 11/09/2021 Florida document number L^{21} 0 ∞ 432 773This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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 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 familial 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

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 = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|---------------------------------------|---------------------------|----------------|
| M.G.2 | Leilz A Billings Esq | 16252 NU20th Street | □Add |
| | | Pembroke P. nes, FL 33029 | Premove |
| | | | □Change |
| MG12 | April R. Marhadaices | 9. 7771 W- 02Kind Dk Blu | <u>d</u> □Add |
| | | Suit : 162 | [Nemove |
| | | SUNDSC, FL 33351 | □Change |
| M ()2 | Law offices of LeilaA. Bellings, P.A. | 15757 Pace Alud | _ADAdd |
| | 3211.133.11.41 | No. 227 | □Remove |
| W | | Pembroke Pines FL 3302) | □Change |
| Mag | Marhadalchau, PLLC | 4771 W. DOKEROLDK.Blud. | tdAdd |
| | | Suite 16) | □Remove |
| | | SUNCOSC, FL 33351 | □ Change |
| | | | □Add |
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| ect | ive date, if other than the date of filing: 11 8 2 02 (optional) |
| ı ell | fective 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 605.020. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a |
| | to the date inserted in this block does not need the appreciable statutory trining requirements, this date with not be instead a nent's effective date on the Department of State's records. |
| | |
| | d 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 led. |
| 15 11 | icu. |
| ted | |
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| | of pul |
| | Signature of a member or authorized representative of a member. |

Filing Fee: \$25.00