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Y. SCOTT FEB 1 6 2022

COVER LETTER

TO: Registration Se Division of Cor					
	nmigration Group, PLLC.				
SUBJECT:	Name of Lim	ited Liability Company			
The material Actions of	Amendment and fec(s) are sub	esitted for filing			
Please return all correspo	ndence concerning this matter	to the following:			
	Dayanna Lima, Esq.				
	<u> </u>	Name of Person	-	• _	
	Dayanna Lima, PLLC.			2022 SEC	
		Firm/Company		FEB	
	17710 Cortland Court			2022 FEB -7 PH 3: 05 SECRETARY OF STATE TALLAHASSEE. FL	
		Address	· · ·	· 1997	13
	Estero, FL 33928			3: 0 STAT E. FL	
		City/State and Zip Code		- , E Q	
	dlima@attorneylima.com				
		to be used for future annual report notifi	canon)		
For further information of	oncerning this matter, please co	all:			
Dayanna Lima, Esq.		704 612-3330 at ()			
Name o	f Person	Area Code Daytime	Telephone Number	r	
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)	Certified	ite of Status &	
<u>Mailing Addres</u> Registration S		Street Address: Registration Sec	tion		
Division of C		Division of Corp	orations		

P.O. Box 6327 Tallahassee, FL 32314 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The U.S. Immigration Group, PLLC.		
(Name of the Limited Liability Comp (A Florida Limited	oany as it now appears on our recor [Liability Company]	<u>'ds.</u>)
The Articles of Organization for this Limited Liability Compan Florida document number 1.22000001214	y were filed on 12/22/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
Nationwide Immigration Law Services, PLLC.		
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2022 SEC
(Principal office address MUST BE A STREET ADDRESS)		2 7 7
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, ente	7 PH 3: 05 The name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Emer Florida street addr	ess
	_ I -	Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>	
I hereby accept the appointment as registered agent and ag 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.	gree to act in this capacity. If te performance of my duties, o s provided for in Chapter 605	and I am familiar with and i, F.S. Or, if this document is:

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>	<u>Address</u>	Type of Action
			□ Add
			□Remove
			□Change
			Remove 22 FF
			HASSEE, FLIE
			Change
			□Add
			□Remove
			□Change
			□Add
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