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COVER LETTER

	gistration Sec ision of Corp					*
CHDIECT.		entral Florida Notary LLC				
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed	d Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return	i all correspo	ndence concerning this matter	to the following:			
		Taylor Gene August Roddo	enberry			
			Name of Person			-
		Central Florida Notary LLG	С			
			Firm/Company	<u> </u>		-
		5528 Arlington River Driv	c			
			Address		-	- !
		Lakeland, FL 33811				
			City/State and Zip C	ode		 ;
		taylor@centralfloridanotary	.com			
For further i	nformation c	e-mail address: (to be used for future an	nual report nour	iicatton)	ר־
Taylor Gene	e August Rod	ldenberry	863	777-1881		
	Name o	f Person	at (Area Code	/Daytime	e Telephone Numbe	r
Enclosed is	a check for th	ne following amount:				
≡ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Certified Cop (additional copy	у.	Certifie	ate of Status &
	ailing Addres			et Address: gistration Sec	ction	
Registration Section Division of Corporations			ision of Cor			
	O. Box 632			Centre of T		01/\
l a	llahassee, l	FL 32314	241	J IN. BYIODTO	e Street, Suite	a i V

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Central Florida Notary LLC	
(Name of the Limited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)
ne Articles of Organization for this Limited Liability Company were filed on $\frac{067}{2}$	24/2022 and assigned
orida document number L22000286470	
is amendment is submitted to amend the following:	
If amending name, enter the new name of the limited liability company he	<u>re</u> :
entral Florida Legal LLC	
e new name must be distinguishable and contain the words "Limited Liability Company," the de-	signation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	(!
rincipal office address MUST BE A STREET ADDRESS)	•
The part of the control of the contr	
	Ċ
nter new mailing address, if applicable:	
Aailing address MAY BE A POST OFFICE BOX)	<u> </u>
Turing undress mar bit a rost of tree mong	r: ÷
	1
If amending the registered agent and/or registered office address on our regent and/or the new registered office address here: Name of New Registered Agent:	ecords, enter the name of the new regi
New Registered Office Address:	
	ida street address
	. Florida
City	, Florida 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

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
			□Add
			□Remove
			□Change
			□Add
			Remove
			☐Change
			□Add
			☐Remove .
			☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
			□Remove
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ective date, if other than the	date of filing:		(opti	onal)	
n effective date is listed, the date mu	st be specific and cannot be prio	r to date of filing or r	nore than 90 days after	r filing.) Pursuani	t to 605.02
te: If the date inserted in this becament's effective date on the D			ng requirements, thi	s date will not	be listed
	•				
ecord specifies a delayed effective	re date, but not an effective	time, at 12:01 a.m.	on the earlier of: (h) The 90th da	y after th
is filed.					
	2023				
Fahruary 7th	2020				
February 7th					
ted February 7th					

Filing Fee: \$25.00