

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

L22000393504

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

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Fax Number : (561) 214-8442

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

WARNER & FITZMARTIN, PLLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

2022 NOV 18 AM 9:37

2022 NOV 18 PM 4:37

APPROVED
AND
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Electronic Filing Menu Corporate Filing Menu Help

NOV 21 2022

K. Brumley

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Warner & Fitzmartin, 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 08/24/2022 and assigned

Florida document number L22000369509

This 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 "LLC."

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: following:

New Registered Office Address: any name
Enter Florida street address

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

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:

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

Title	Name	Address	Type of Action
MGR	WARNER, AARON	631 LUCERNE AVE STE 71	☐ Add

LAKE WORTH, FL 33460	☒ Remove
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☐ Change

MGR	FITZMARTIN, ELISSA	631 LUCERNE AVE STE 71	☐ Add
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LAKE WORTH, FL 33460	☒ Remove
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☐ Change

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	Warner Law, PLLC	631 Lucerne Ave, Suite 71	☒ Add
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Lake Worth, FL 33460	☐ Remove
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☐ Change

MGR	Fitzmartin Law, PLLC	631 Lucerne Ave, Suite 71	☒ Add
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Lake Worth, FL 33460	☐ Remove
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☐ Change

LAKE WORTH, FL 33460	☐ Add
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☐ Remove

MGR	Warner Law, PLLC	631 Lucerne Ave, Suite 71	☐ Change
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LAKE WORTH, FL 33460	☐ Add
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☐ Remove

MGR	Fitzmartin Law, PLLC	631 Lucerne Ave, Suite 71	☐ Change
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Lake Worth, FL 33460	☐ Remove
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Filing Fee: \$25.00