123000110789

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

TO:

| | Registration Se Division of Cor | | | | | |
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| SUBJEC | Be Wise Le | egal Document Support Service | es | , | | |
| SUBJEC | 1. | Name of Lin | uited Liability Company | | | |
| The enclo | osed Articles of | Amendment and fee(s) are sub | omitted for filing. | | | |
| Please ret | urn all correspo | ondence concerning this matter | to the following: | | | |
| | | Barbara Smith | | | | |
| | | | Name of Person | | | |
| | | Be Wise Legal Document | Support Services | | | |
| | | | Firm/Company | | | |
| | | 4501 Whitworth Lane | | | | |
| | | | Address | | | |
| | | Tampa, FL 33624 | | | | |
| | | | City/State and Zip Code | | | |
| | | bewiselegaldoc@gmail.con | | | | |
| | | E-mail address: (| to be used for future annual report noti | fication) | | |
| For furthe | r information c | oncerning this matter, please c | all; | | | |
| Barbara S | Smith | | 813 464-1377 | | | |
| | Name o | f Person | Area Code Daytim | ne Telephone Number | | |
| Enclosed | is a check for th | ne following amount: | | | | |
| ■ \$25.0 | 0 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) | | |
| Mailing Address: Registration Section | | | Street Address: | LATE O | | |
| Registration Section Division of Corporations | | | - | Registration Section Division of Corporations | | |
| F | P.O. Box 632 | 7 | The Centre of T | - | | |
| 7 | Γallahassee, I | FL 32314 | 2415 N. Monro | e Street, Suite 810 | | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Be Wise Legal Document Support Services (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 $\frac{03/02/2023}{1}$ and assigned Florida document number L23000110789 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: DocLegal Support Services LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 4501 Whitworth Lane Enter new principal offices address, if applicable: Tampa, FL 33624 (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 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> | Name | Address | Type of Action |
|--------------|-------------|-------------|----------------|
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