L23000196388

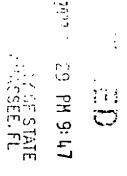
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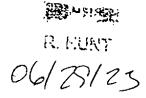
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Latoya M. Williams 208 Taylor Bay Ln. Brandon, Florida 33510

> Registration Section Divisions of Corporations P.O. Box 6327 Tallahassee, FL 32314

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COVER LETTER

TO:

TO: Registration S Division of Co			
The Law C	Offices of Latoya M. Williams, I	PLLC.	
NUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	LATOYA WILLIAMS		7
		Name of Person	
	LM.W Law Offices, PLLC	·	
		Firm/Company	- SEES
	208 Taylor Bay Ln		9: 47 E.FL
		Address	
	Brandon, FL 33510		
	latoya@lmwlawoffices.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
For further information	concerning this matter, please c	all:	
Latoya Williams		904 814-6732 at ()	
Name	of Person	Area Code Daytime Telephone N	umber
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Cer (additional copy is enclosed) Cer	00 Filing Fee, tificate of Status & tified Copy litional copy is enclosed)
Mailing Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Su Tallahassee, FL 32303	ite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Law Offices of Latoya M. Williams, PLLC.		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our Liability Company)	records.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000196388</u> .	y were filed on <u>04/20/2023</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
LM.W Law Offices, PLLC.		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	-N/A	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	PH 9: 47
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records,	enter the name of the new register
Name of New Registered Agent: New Registered Office Address:	ThierFlorida stree	t address
		Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
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ective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date of filing or more than	(optional) 90 days after filing.) Pr	ursuant to 60.	5.020
te: If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	rements, this date wi	ll not be lis	ted a
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the is filed.	earlier of: (b) The 9	90th day afte	er the
s med.			
ted JUNE 26 2023			
lais m lileann A			

Filing Fee: \$25.00

Typed or printed name of signee