

L23000247152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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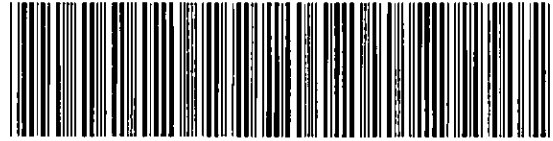
(Business Entity Name)

(Document Number)

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2024 DEC -2 PM 4:10  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Mucерino Law Group, PLLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nicholas Mucерino

\_\_\_\_\_  
Name of Person

Florida Injury Lawyers, PLLC

\_\_\_\_\_  
Firm/Company

238 NE 1st Ave

\_\_\_\_\_  
Address

Delray Beach, Florida, 33444

\_\_\_\_\_  
City/State and Zip Code

Nick@flinjury.us

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nicholas Mucерino

561 704-1420

at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 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  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 12, 2024

NICHOLAS MUCERINO  
238 NE 1ST AVENUE  
DELRAY BEACH, FL 33444

SUBJECT: THE MUCERINO LAW GROUP, PLLC  
Ref. Number: L23000247152

We have received your document for THE MUCERINO LAW GROUP, PLLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Returning the Articles of Amendment as requested.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan  
Regulatory Specialist III

Letter Number: 824A00024715

I have changed the name, per the request of agent  
I share w/ here is the new name. Please process  
w/ money order that is in your possession.

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2024 DEC -2 PM 4: 10

The Mucerino Law Group, PLLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

DATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on May 19, 2023 and assigned  
Florida document number L23000247152

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

~~Mucerino Law Group, PLLC~~ Mucerino Law, PLLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

238 NE 1st Ave, Delray Beach, FL 33444

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

238 NE 1st Ave, Delray Beach, FL 33444

(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

\_\_\_\_\_, Florida \_\_\_\_\_  
City 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**

[illegible]

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

2024 DEC -2 PM 4: 00

THILASSEE, FLORIDA

E. Effective date, if other than the date of filing: 10/7/2024 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 10/11/27, \_\_\_\_\_

Nicholas W. Mucirino

Signature of a member or authorized representative of a member

Nicholas Mucerino

Typed or printed name of signee

**Filing Fee: \$25.00**