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COVER LETTER

TO: Registration Section Division of Corporations

Goldberger Saladrigas PLLC

SUBJECT: ____

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:

Matthew Goldberger Name of Person Goldberger Saladrigas PLLC Firm/Company 1555 Palm Beach Lakes Blvd., Suite 1400 Address West Palm Beach, FL 33401 City/State and Zip Code matthew@gslegalteam.com E-mail address: (to be used for future annual report notification) 문 For further information concerning this matter, please call: 561 659-8337 Matthew Goldberger **6**.5 at (____ Area Code Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$60.00 Filing Fee. 🗇 \$30.00 Filing Fee & □ \$55.00 Filing Fee & S25.00 Filing Fee Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Goldberger Saladrigas PLLC (<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on <u>November 7, 2023</u> and assigned Florida document number <u>L230000505892</u>

This amendment is submitted to amend the following:

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

Goldberger, Sacks, & Saladrigas 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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:	>:
-	
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>
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B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> <u>agent and/or the new registered office address here</u>:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr	<i>ess</i>
	, ł	lorida

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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Mac Kenzie Sacks	1555 Palm Beach Lakes Blvd., Suite 1400	= Add
		West Palm Beach, FL 33401	🗆 Remove
			□Change
			🗆 Add
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			🗋 Change
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			Change
			🗆 Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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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.

June 3	2024	
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	Signature of a member or authorized representative of a member	-
	Matthew A. Goldberge	
	Typed or printed name of signee	

Filing Fee: \$25.00