

L34000 360200

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

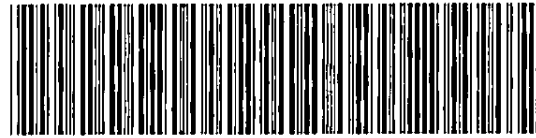
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
JUN 18 2025

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FILED
2025 JUN 17 PM 2:47

2025 JUN 17 PM 4:30

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

Please use funds from the account: L20210000160: \$25.00

Authorized Signature

Karpen Legal PLLC L24000360200

Business Name

#Document

___ Certified copy of Articles of

___ Certificate of Status

___ Profit

___ Not for Profit

___ LLC

___ Domestication

___ INC

___ CORP

___ PLLC

___ GP

☒ Amendment

___ Resignation of Member/MGR

___ Statement of change of Registered

___ Revocation of Dissolution

___ Conversion

___ Statement of Correction

___ Merger

___ DISSOLUTION

OTHER FILINGS

___ TRANSMITTAL LETTER

___ Fictitious Name -

___ Statement of Authority
business

___ APOSTIL _____
COUNTRY

EXAMINER'S INITIALS: _____

REGISTRATION/QUALIFICATIONS

___ Foreign Filing

___ Partnership

___ Reinstatement

___ Articles of CORRECTION

___ Withdraw of Certificate of Authority

___ TRADEMARK

___ Domestication

_____ Other

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Karpen Legal 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:

Sean Napolitano
Name of Person

Karpen Legal PLLC
Firm/Company

3049 Windham Dr.
Address

Eustis, FL 32726
City/State and Zip Code

sean.napolitano@karpenlegal.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sean Napolitano at (407) 221-7358
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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

2025 JUN 17 PM 2:52

Kasper Legal 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 8/16/2024 and assigned Florida document number L24000360200.

This amendment is submitted to amend the following:

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

MINKS Law & Advocacy 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)

No change

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

No change

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:

No change

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:

[illegible]

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.

Dated May 29 . 2025

Sean Napolitano

Typed or printed name of signee