Division of Corporations Electronic Filing Cover Sheet

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From:

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Account Number : I20050000159

Phone

: (772)564-7844

Fax Number

: (772)564-7845

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COVER LETTER

TO:

Registration Section Division of Corporations

Rossway Moore Swan, P.L.

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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:

Kevin M. Barry, Esq

Rossway Moore Swan, P.L.

Firm/Company

2101 Indian River Blvd., Suite 200

Vero Beach, FL 32960

City/State and Zip Code

kbarry@verobeachlawyers.com

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

For further information concerning this matter, please call:

Kevin M. Barry

Name of Person

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status □ \$55.00 Filing Pee & 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 Tallahassec, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(((H14000053843 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROSSWAY MOORE SWAN, P.L.	((()	H14000053843 3)))
(Name of the Limited Liability Compan (A Florida Limited L	iy as it now appears on our recordiability Company)	ds.)
The Articles of Organization for this Limited Liability Company Florida document number L9900001331	were filed on March 1, 199	99 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
Rossway Swan Tierney Barry, P.L.		
The new name must be distinguishable and end with the words "Limited Liabi	lity Company," the designation "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		TEM E
(Principal office address MUST BE A STREET ADDRESS)		AR -5 L
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our record	ls, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	iss .
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office to company has been notified in writing of this change.	performance of my duties, a rovided for in Chapter 605,	nd I am familiar with and F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

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Mar. 5. 2014 9:29AM Rossway Moore Swan	No. 9891 P. 5
If amending any other information, enter change(s) here: (Attach ad	lditional sheets, if necessary.)
	(/711 4000052842 2)))
	(((H14000053843 3)))
Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed date and can	(optional)
Dated March 5 Dated Warch 5 Dated Warch 5 Dated Warch 5	la
Signature of a member or authorized representation of the Bradley W. Rossway Typed or printed name of sign	Mative of a member
·	2014 MAR SECRETALLAHA
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Page 3 of 3

Filing Fee: \$25.00